

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060484

FILED
Apr 22, 2009
Secretary of State

Entity Name: PROCARE AUTO CENTER, LLC

Current Principal Place of Business:

170 ST CROIX AVENUE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

170 ST CROIX AVENUE
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 20-1888578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARSKI, KATHERINE A ESQ.
C/O JOSEPH C. KEMPE, P.A.
941 NORTH HIGHWAY A1A
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLYDE KELLER FAMILY LIMITED PARTNERSHIP
Address: 170 ST CROIX AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KELLER, CLYDE
Address: 170 ST CROIX AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: MGRM () Change (X) Addition
Name: WEEKS, STACY
Address: 4131 OUTBACK DRIVE
City-St-Zip: FAYETTEVILLE, NC 28312

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CLYDE KELLER

MGRM

04/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date