

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 22, 2006 8:00 am**  
**Secretary of State**

03-08-2006 90039 046 \*\*\*\*55.00

<b>DOCUMENT # L04000065898</b> 1. Entity Name <b>GLENN'S QUALITY AUTO &amp; ACCESSORIES LLC</b>					
Principal Place of Business <b>9732 SE US HIGHWAY 441 BELLEVUE, FL 34420-6220</b>			Mailing Address <b>9732 SE US HIGHWAY 441 BELLEVUE, FL 34420-6220</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>D'ARVILLE, BRENDA L 18120 E PENNSYLVANIA AVE. STE C DUNNELLON, FL 34432</b>				7. Name and Address of New Registered Agent  Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">             Signature, typed or printed name of registered agent and title if applicable.         </div> <div style="width: 40%; text-align: right;"> <b>316106</b>            (NOTE: Registered Agent signature required when reinstating)         </div> </div>					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS / MANAGERS</b>				<b>10. ADDITIONS / CHANGES</b>	
TITLE	MGR <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALKER, GLENN D			NAME	
STREET ADDRESS	9732 SE US HIGHWAY 441			STREET ADDRESS	
CITY - ST - ZIP	BELLEVUE, FL 344206220			CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">             Signature         </div> <div style="width: 40%; text-align: right;"> <b>312106</b> manager         </div> </div>					



ATTACHMENT  
30002910

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 9, 2006

GLENN'S QUALITY AUTO & ACCESSORIES LLC  
9732 SE US HIGHWAY 441  
BELLEVIEW, FL 34420-6220

Subject: GLENN'S QUALITY AUTO & ACCESSORIES LLC

Reference Number: L04000065898

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$55.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/ms

ANNUAL REPORTS SECTION

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