

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000018043



1. Entity Name

FRANK COATNEY AUTO SALES, LLC

Principal Place of Business

2516 W. 23RD STREET
PANAMA CITY FL 32405
US

Mailing Address

2516 W. 23RD STREET
PANAMA CITY FL 32405
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-2452260

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

1st MOORE

CR2E083 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COATNEY, J. FRANK JR
2516 W. 23RD STREET
PANAMA CITY FL 32405

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE: MGRM ☐ Delete
NAME: COATNEY, J. FRANK JR
STREET ADDRESS: 2516 W. 23RD STREET
CITY- ST- ZIP: PANAMA CITY FL 32405

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

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10. ADDITIONS/CHANGES

☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY- ST- ZIP:
000000738451
05/11/07-80066-023 50.00

☐ Change ☐ Addition
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CITY- ST- ZIP:

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 608, Florida Statutes.

SIGNATURE:

FRANK COATNEY JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-26-07 850-832-1877