

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038355

FILED  
Mar 29, 2006  
Secretary of State

Entity Name: DAVIS AUTO ENTERPRISE LLC

**Current Principal Place of Business:**

967A BLANDING BLVD  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

**Current Mailing Address:**

967A BLANDING BLVD  
ORANGE PARK, FL 32065

**New Mailing Address:**

FEI Number: 65-1248349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD  
#221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

LAYE ENTERPRISES, INC  
795-C BLANDING BLVD  
ORANGE PARK, FL 32065 US

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: L. B. LAYE, JR.

03/29/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: KEREMENETA K.O. DAVIS  
Address: 967A BLANDING BLVD  
City-St-Zip: ORANGE PARK, FL 32065

Title: MGR (X) Delete  
Name: DAVIS, LYNNE C  
Address: 967A BLANDING BLVD  
City-St-Zip: ORANGE PARK, FL 32065

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KEREMENETA K. O. DAVIS

MGR

03/29/2006

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