

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054559

FILED
May 08, 2008
Secretary of State

Entity Name: BRANDON USED CAR AUTOMALL, LLC

Current Principal Place of Business:

1207 EAST BRANDON BLVD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

9545 NORTH FLORIDA AVENUE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 83-0433812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HODGES, GEOFFREY T
905 SHADED WATER WAY
LUTZ, FL 33549 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: MGR () Delete
Name: BALASCO, GREGORY
Address: 9545 NORTH FLORIDA AVE
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: HAIRE, MARY K
Address: 9545 NORTH FLORIDA AVE
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: HAIRE, ERNEST B III
Address: 9545 NORTH FLORIDA AVE
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: HODGES, GEOFFREY T
Address: 9545 NORTH FLORIDA AVE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES:

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

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

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 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: GEOFFREY TODD HODGES

MGR

05/08/2008

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