

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057005

FILED
Jul 02, 2007
Secretary of State

Entity Name: AVENGER TRANSMISSIONS, LLC

Current Principal Place of Business:

6106 KESTREL PARK DR.
LITHIA, FL 33547

New Principal Place of Business:

Current Mailing Address:

6106 KESTREL PARK DR.
LITHIA, FL 33547

New Mailing Address:

FEI Number: 20-2974091 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:

FARAGE, NANCY
707 NORTH FRANKLIN ST.
TAMPA, FL 33602 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: AVENGER INVESTMENTS,, LLC
Address: 6106 KESTRELPARK DR.
City-St-Zip: LITHIA, FL 33547

Title: MGR () Delete
Name: COMLY, TERRY L
Address: P.O. BOX 92498
City-St-Zip: LAKELAND, FL 33804

Title: MGR () Delete
Name: RADUNKO, LOUIS R
Address: 10401 SNUG HARBOR RD NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

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:

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: AVENGER INVESTMENTS, LLC

MGR

07/02/2007

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