

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079321

FILED
Aug 23, 2006
Secretary of State

Entity Name: COMPLETE AUTO MANAGEMENT, LLC

Current Principal Place of Business:

19700 QUARTERLY PARKWAY
ORLANDO, FL 32833

New Principal Place of Business:

19700 QUARTERLY PARKWAY
ORLANDO, FL 32833 US

Current Mailing Address:

19700 QUARTERLY PARKWAY
ORLANDO, FL 32833

New Mailing Address:

19700 QUARTERLY PARKWAY
ORLANDO, FL 32833 US

FEI Number: 20-3462625 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:

CARY, KELLY S
2 SOUTH ORANGE AVENUE 5TH FL
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

GROOVER, CLARAMARGARET H
390 NORTH ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 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: CLARAMARGARET H. GROOVER

08/23/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JDOBISCH CONSULTANTS, , INC.
Address: 19700 QUARTERLY PARKWAY
City-St-Zip: ORLANDO, FL 32833

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JDOBISCH CONSULTANTS, , INC.
Address: 19700 QUARTERLY PARKWAY
City-St-Zip: ORLANDO, FL 32833 US

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: JOERG M. DOBISCH, PRESIDENT JDOBISCH CONSU

MGRM

08/23/2006

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