

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 01, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000117319**

1. Entity Name:  
**BALLAST POINT CAR WASH, LLC**



Principal Place of Business      Mailing Address

**2901 BAYSHORE COURT  
TAMPA, FL 33611**      **P.O. BOX 1311  
TAMPA, FL 33601-1311**

**DO NOT WRITE IN THIS SPACE**



01302008 No Chg-LLC      CR2E083 (12/07)

4. FEI Number <b>20-3954934</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**NEUKAMM, JOHN B  
305 SOUTH BOULEVARD  
TAMPA, FL 33606**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MACLEOD, BRUCE W 2901 BAYSHORE COURT TAMPA, FL 33611</b>
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U00000810559  
02/08/08-80070-003 138.75

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Bruce Macleod      Date: 2/1/08      Daytime Phone #: (813) 316-7788

*Bruce Macleod, Managing member*