

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000120144

**FILED**  
**May 05, 2011**  
**Secretary of State**

**Entity Name:** RAY'S AUTO REPAIR, LLC

**Current Principal Place of Business:**

1731 FERN PALM DRIVE  
UNIT 1D  
EDGEWATER, FL 32132 US

**New Principal Place of Business:**

**Current Mailing Address:**

1731 FERN PALM DRIVE  
UNIT 1D  
EDGEWATER, FL 32132 US

**New Mailing Address:**

**FEI Number:** 20-3950920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIEBIS, DANIEL S  
3890 TURTLE CREEK DRIVE  
SUITE B  
PORT ORANGE, FL 32127 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:** MR.  
**Name:** COUTURE, O R  
**Address:** 3330 VISTA PALM DRIVE  
**City-St-Zip:** EDGEWATER, FL 32141 US

**Title:** MRS.  
**Name:** COUTURE, JOAN  
**Address:** 3330 VISTA PALM DRIVE  
**City-St-Zip:** EDGEWATER, FL 32141 US

I hereby 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:** RAY COUTURE

OWNE

05/05/2011

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