

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000008706

FILED
Apr 18, 2007
Secretary of State

Entity Name: BUY HERE-PAY HERE, LLC

Current Principal Place of Business:

464046 E SR 200
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

464046 E SR 200
YULEE, FL 32097

New Mailing Address:

FEI Number: 20-4181703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, PAUL D
464046 E SR 200
YULEE, FL 32097 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: CLARK, PAUL D
Address: 464046 E SR 200
City-St-Zip: YULEE, FL 32097

Title: MGRM () Delete
Name: CLARK, ELIZABETH B
Address: 464046 E SR 200
City-St-Zip: YULEE, FL 32097

Title: MGRM () Delete
Name: CLARK, JAMES W
Address: 18336 AUTUMN RD.
City-St-Zip: HILLIARD, FL 32046

Title: MGRM () Delete
Name: HEMPSTEAD, RHONDA R
Address: 293 OTTER RUN DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

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 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: JAMES W. CLARK

MGRM

04/18/2007

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