

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039042

FILED
Mar 08, 2007
Secretary of State

Entity Name: FLEET SERVICES OF VOLUSIA, LLC

Current Principal Place of Business:

190 NORTH WOODWARD AVENUE
DELAND, FL 32720

New Principal Place of Business:

1527 LANGLEY AVE.
DELAND, FL 32724

Current Mailing Address:

190 NORTH WOODWARD AVENUE
DELAND, FL 32720

New Mailing Address:

1527 LANGLEY AVE.
DELAND, FL 32724

FEI Number: 20-4693232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR () Delete
Name: RYALS, WILLIAM L
Address: 190 NORTH WOODWARD AVENUE
City-St-Zip: DELAND, FL 32720

Title: MGR () Delete
Name: ALLMAN, STACEY D
Address: 190 NORTH WOODWARD AVENUE
City-St-Zip: DELAND, FL 32720

Title: S () Delete
Name: ALLMAN, STACEY D
Address: 190 NORTH WOODWARD AVENUE
City-St-Zip: DELAND, FL 32720

Title: T () Delete
Name: RYALS, WILLIAM L
Address: 190 NORTH WOODWARD AVENUE
City-St-Zip: DELAND, FL 32720

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: STACEY ALLMAN

VP

03/08/2007

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