

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000055087

FILED
Apr 29, 2007
Secretary of State

Entity Name: CCW EXPRESS CARE VALVOLINE, LLC

Current Principal Place of Business:

10000 ARCOS AVENUE
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

10000 ARCOS AVENUE
ESTERO, FL 33928

New Mailing Address:

FEI Number: 20-4961379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JURSINSKI, KEVIN F ESQ
7800 UNIVERSITY POINTE DR SUITE 200
FORT MYERS, FL 33907 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: ALLISON, GENE N
Address: 20233 WILDCAT RUN DR
City-St-Zip: ESTERO, FL 33928

I hereby certify that the information supplied with this filing does not qualify 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: GENE ALLISON

MGR

04/29/2007

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