

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079957

FILED  
Aug 17, 2007  
Secretary of State

Entity Name: CARSCAV LLC

## Current Principal Place of Business:

5472 FIRST COAST HWY, UNIT 8  
FERNANDINA BEACH, FL 32034

## New Principal Place of Business:

5472 FIRST COAST HWY  
UNIT 8  
FERNANDINA BEACH, FL 32034

## Current Mailing Address:

P.O. BOX 15460  
FERNANDINA BEACH, FL 32035

## New Mailing Address:

FEI Number: 20-5300583      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

SCAVOTTO, STEPHEN P  
4602 CARLTON DUNES DRIVE UNIT 4  
FERNANDINA BEACH, FL 32034 US

## Name and Address of New Registered Agent:

SCAVOTTO, STEPHEN P  
4602 CARLTON DUNES DRIVE  
UNIT 4  
FERNANDINA BEACH, FL 32034 US

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:

08/17/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SCAVOTTO, STEPHEN  
Address: 4602 CARLTON DUNES DR UNIT 4  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM ( ) Delete  
Name: SCAVOTTO, CAROL A  
Address: 4602 CARLTON DUNES DR UNIT 4  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM ( ) Delete  
Name: SCAVOTTO, STEPHANIE  
Address: 4602 CARLTON DUNES DR UNIT 4  
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: MGRM (X) Change ( ) Addition  
Name: SCAVOTTO, STEPHANIE  
Address: 1021 ISLE OF PALMS LANE  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: STEPHEN P SCAVOTTO

PRES

08/17/2007

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