

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093906

Entity Name: CITY AUTO CREDIT, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

9550 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 US

New Principal Place of Business:

Current Mailing Address:

9550 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 US

New Mailing Address:

FEI Number: 20-5601188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORNSTEIN, MARK L
2 SOUTH ORANGE AVENUE
5TH FLOOR
ORLANDO, FL 32801 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: OWEN, DARREN
Address: 9550 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837 US

Title: MGR () Delete
Name: WERNER, CURTIS G
Address: 9550 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837 US

Title: MGR () Delete
Name: BOYD, JEFFREY E
Address: 9550 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837 US

Title: MGR () Delete
Name: ELLIS, HEATHER A
Address: 9550 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OWEN, DARREN E
Address: 9550 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: NEGRON, PRESTON S
Address: 9550 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837 US

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: DARREN E OWEN

MGRM

03/20/2009

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