

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098205

FILED  
Jan 26, 2009  
Secretary of State

Entity Name: AUTO DRIVEAWAY TAMPA LLC

**Current Principal Place of Business:**

112 S MAGNOLIA AVE STE 200  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6129  
SOUTH BEND, IN 46660 US

**New Mailing Address:**

FEI Number: 14-1980231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHAH SERVICES, LLC  
2305 DOVEWOOD ESTATES COURT  
VALRICO, FL 33594 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: HORTON, KEVIN  
Address: 820 NILES AVE. SUITE E  
City-St-Zip: SOUTH BEND, IN 46617 US

Title: MGRM ( ) Delete  
Name: BEUG, THOMAS  
Address: 400 EAST WISCONSIN AVE. SUITE 330  
City-St-Zip: MILWAUKEE, WI 53202 US

**ADDITIONS/CHANGES:**

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 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: KEVIN C HORTON

VP

01/26/2009

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