

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067189

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: POINT A TO B AUTO CONNECTION, LLC

**Current Principal Place of Business:**

819 TOWNSON BLVD.  
SUITE 1A  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

819 TOWNSON BLVD.  
SUITE 1A  
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

323 BROWARD ROAD  
JACKSONVILLE, FL 32218 US

FEI Number: 11-3818556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JACKSON, LOUIS JR.  
5227 DONCASTER AVENUE  
JACKSONVILLE, FL 32208 US

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

WARDEN, BELINDA J  
810 W. 44TH STREET  
JACKSONVILLE, FL 32208 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: BELINDA J. WARDEN

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WARDEN, TYRONE S  
Address: 819 TOWNSON BLVD., SUITE 1A  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGRM ( ) Delete  
Name: WARDEN, BELINDA J  
Address: 819 TOWNSON BLVD., SUITE 1A  
City-St-Zip: JACKSONVILLE, FL 32211 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: TYRONE S. WARDEN

MGRM

04/30/2008

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