

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000078194

**Entity Name:** GULF COAST AUTOMOTIVE, L.L.C.

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5270 CRAWFORDVILLE HWY.  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

1110 WALDEN RD  
TALLAHASSEE, FL 32305

**Current Mailing Address:**

1110 WALDEN ROAD  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 32-0210400      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BASTON, STANLEY R  
1110 WALDEN ROAD  
TALLAHASSEE, FL 32317      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  
**Name:** BASTON, STANLEY R  
**Address:** 1110 WALDEN ROAD  
**City-St-Zip:** TALLAHASSEE, FL 32317

**Title:** MGRM  
**Name:** BASTON, KATHERINE N  
**Address:** 1110 WALDEN RD  
**City-St-Zip:** TALLAHASSEE, FL 32317

I hereby 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: KATHERINE BASTON      MGRM      04/23/2011

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