

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094207

FILED
Mar 04, 2008
Secretary of State

Entity Name: BOB WILSON DODGE CHRYSLER JEEP, LLC

Current Principal Place of Business:

11945 NORTH FLORIDA AVENUE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

11945 NORTH FLORIDA AVENUE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 26-1093958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODWIN, JAMES W
201 NORTH FRANKLIN STREET
SUITE 2000
TAMPA, FL 33602 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: MGR () Delete
Name: WILSON, ROBERT M
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: WILSON, PATRICIA M
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: KRIZ, ANSLEYIA W
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

Title: CP () Delete
Name: WILSON, ROBERT M
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

Title: VP () Delete
Name: WILSON, PATRICIA M
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

Title: VST () Delete
Name: KRIZ, ANSLEY W
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: KRIZ, ANSLEY W
Address: 11945 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

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

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: ANSLEY W KRIZ

MGR

03/04/2008

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