

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000094624

**FILED**  
**Apr 29, 2008**  
**Secretary of State**

**Entity Name:** ADVANCED AUTO REPAIR OF OCALA LLC

**Current Principal Place of Business:**

2200 NE 36TH AVE  
BLDG 500 SUITE 501  
OCALA, FL 33470 US

**New Principal Place of Business:**

**Current Mailing Address:**

4383 NE 132ND PLACE  
ANTHONY, FL 32617 US

**New Mailing Address:**

2200 NE 36TH AVE  
BLDG 500 SUITE 501  
OCALA, FL 33470 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

TOMEY, MARY R  
4383 NE 132ND PLACE  
ANTHONY, FL 32617 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: TOMEY, MARY R  
Address: 4383 NE 132ND PLACE  
City-St-Zip: ANTHONY, FL 32617 US

**ADDITIONS/CHANGES:**

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:** MARY ROBIN TOMEY

MGR

04/29/2008

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