

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105321

FILED
Jul 19, 2008
Secretary of State

Entity Name: UNITED MOTOR CARS OF JACKSONVILLE, LLC

Current Principal Place of Business:

5552 BEACH BLVD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

5552 BEACH BLVD
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 33-1184569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NALBANT, IBRAHIM V
560 STAFFORDSHIRE DR.
JACKSONVILLE, FL 32225 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NALBANT, IBRAHIM V
Address: 7047-7 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGR () Delete
Name: COSAR, ALPER
Address: 7047-7 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NALBANT, IBRAHIM V
Address: 5552 BEACH BLVD.
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR (X) Change () Addition
Name: COSAR, ALPER
Address: 5552 BEACH BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

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: IBRAHIM V NALBANT

MGR

07/19/2008

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