

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116393

Entity Name: LMG AUTOSPORT, LLC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

11349 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837

## New Principal Place of Business:

11349 SOUTH ORANGE BLOSSOM TRAIL  
105-B  
ORLANDO, FL 32837

## Current Mailing Address:

2209 SW 44TH STREET  
CAPE CORAL, FL 33914

## New Mailing Address:

2209 SW 44TH TERRACE  
CAPE CORAL, FL 33914

FEI Number: 26-1423860

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LASANTA, ARNALDO  
6360 RALEIGH ST  
APT 1702  
ORLANDO, FL 32835 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: LASANTA, ARNALDO  
Address: 6360 RALEIGH ST APT 1702  
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

Title: SECR ( ) Change (X) Addition  
Name: LASANTA, ROSYBONNE  
Address: 2209 SW 44TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

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: ARNALDO LASANTA

MGR

04/29/2009

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