

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053518

FILED
Apr 30, 2009
Secretary of State

Entity Name: AUTO DEALER ACCESSORIES, LLC

Current Principal Place of Business:

3101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

3101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 26-3636824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERS, LYNETTE
3101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

WALTERS, LYNETTE MGRM
3101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176 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: LYNETTE WALTERS

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WALTERS, LYNETTE
Address: 3101 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGRM () Delete
Name: ENGLAND, BEN
Address: 80 HUMMINGBIRD LANE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WALTERS, LYNETTE MGRM
Address: 3101 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGRM (X) Change () Addition
Name: ENGLAND, BEN MGRM
Address: 80 HUMMINGBIRD LANE
City-St-Zip: ORMOND BEACH, FL 32174

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: LYNETTE WALTERS

MGRM

04/30/2009

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