

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055603

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: MULLINAX FORD OF OSCEOLA COUNTY, LLC

## Current Principal Place of Business:

1810 EAST IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34744

## New Principal Place of Business:

## Current Mailing Address:

1810 EAST IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34744

## New Mailing Address:

FEI Number: 26-2752759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCLEOD, RAYMOND A  
48 EAST MAIN STREET  
APOPKA, FL 32703 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: MGRM ( ) Delete  
Name: MULLINAX, LAWRENCE E  
Address: 1810 EAST IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM ( ) Delete  
Name: BARON, CHRISTOPHER J  
Address: 1810 EAST IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM ( ) Delete  
Name: MULLINAX, GERALD L  
Address: 1810 EAST IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM ( ) Delete  
Name: MULLINAX, CHARLES E  
Address: 1810 EAST IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: KISSIMMEE, FL 34744

## ADDITIONS/CHANGES:

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

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: GERALD L. MULLINAX

MGRM

01/20/2009

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