

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000096090

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** AUTOPROS ENTERPRISE, LLC

**Current Principal Place of Business:**

16403 ZURRAQUIN DE AVILA  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

16403 ZURRAQUIN DE AVILA  
TAMPA, FL 33613

**New Mailing Address:**

**FEI Number:** 26-3525000

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLS, FREDERICK J  
1200 W. PLATT STREET, SUITE 100  
MORRISON & MILLS, P.A.  
TAMPA, FL 33606 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  
**Name:** WEATHERMAN, GARY L MGRM  
**Address:** 16403 ZURRAQUIN DE AVILA  
**City-St-Zip:** TAMPA, FL 33613

**Title:** MGR  
**Name:** WOODWARD, MARK  
**Address:** 16403 ZURRAQUIN DE AVILA  
**City-St-Zip:** TAMPA, FL 33613

**Title:** MGRM  
**Name:** WEATHERMAN, BETTY MGRM  
**Address:** 16403 ZURRAQUIN DE AVILA  
**City-St-Zip:** TAMPA, FL 33613

I hereby 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:** MARK WOODWARD

MGR

01/12/2011

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