

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000101192

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** MAC'S AUTO REPAIR SHOP, LLC

**Current Principal Place of Business:**

635 NW 13TH STREET  
SUITE C  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

635 NW 13TH STREET  
SUITE B  
GAINESVILLE, FL 32601

**Current Mailing Address:**

635 NW 13TH STREET  
SUITE C  
GAINESVILLE, FL 32601

**New Mailing Address:**

635 NW 13TH STREET  
SUITE B  
GAINESVILLE, FL 32601

**FEI Number:** 27-1198714      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

COX, MARVIN A  
635 NW 13TH STREET  
SUITE C  
GAINESVILLE, FL 32601 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:** MGRM  
**Name:** COX, MARVIN A  
**Address:** 635 NW 13TH STREET, SUITE B  
**City-St-Zip:** GAINESVILLE, FL 32601

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: MARVIN A COX

MGRM

05/03/2010

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