

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104280

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** OVERDRIVE AUTOMOTIVE LLC

**Current Principal Place of Business:**

3016 NE 20TH WAY  
GAINESVILLE, FL 32609 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5152  
GAINESVILLE, FL 32627 US

**New Mailing Address:**

**FEI Number:** 45-3232399      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MENDOZA, RICARDO S  
4856 NW 44TH AVE  
APT #104  
GAINESVILLE, FL 32609 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:** MENDOZA, RICARDO S  
**Address:** 4856 NW 44TH AVE APT#104  
**City-St-Zip:** GAINESVILLE, FL 32606 US

**Title:** MEMB  
**Name:** ASHLEY, ADAM ;  
**Address:** 7515 NE 47TH ST  
**City-St-Zip:** GAINESVILLE, FL 32609

**Title:** MEMB  
**Name:** ASHLEY, TRAVIS G  
**Address:** 12013 NE CR 1471  
**City-St-Zip:** WALDO, FL 32694 US

**Title:** MEMB  
**Name:** BATES, ROBERT W  
**Address:** 21707 SE 16TH AVE  
**City-St-Zip:** HAWTHORNE, FL 32640 US

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:** RICARDO MENDOZA

MGRM

02/07/2012

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