

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000145731

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** EVERYONE DRIVES FINANCE LLC

**Current Principal Place of Business:**

9393 NORTH FLORIDA AVE  
TAMPA, FL 33612

**New Principal Place of Business:**

13759 N NEBRASKA AVE  
TAMPA, FL 33613

**Current Mailing Address:**

9393 FLORIDA AVE  
TAMPA, FL 33612

**New Mailing Address:**

13759 N NEBRASKA AVE  
TAMPA, FL 33613

**FEI Number:** 45-4596178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, STANLEY H SR.  
9393 N FLORIDA AVE  
TAMPA, FL 33612 US

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

JACKSON, STANLEY H SR.  
13759 N NEBRASKA AVE  
TAMPA, FL 33613 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: STANLEY H JACKSON SR

04/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JACKSON, STANLEY H SR.  
Address: PO BOX 290624  
City-St-Zip: TAMPA, FL 33687

Title: MGRM  
Name: JACKSON, STANLEY H JR.  
Address: PO BOX 290624  
City-St-Zip: TAMPA, FL 33687

Title: MGRM  
Name: ABERNATHY, JOE B  
Address: 5470 E BUSCH BLVD #402  
City-St-Zip: TAMPA, FL 33617

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: STANLEY H JACKSON SR

MGRM

04/12/2012

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