## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L98000001576

Entity Name: SONIC AUTOMOTIVE - 1720 MASON AVE., DB, LLC

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	ON AVENUE A BEACH, FL	32117			
Current Mailing Address:			New Mailing Address:		
	ON AVENUE A BEACH, FL	32117			
FEI Number	: 57-1072509	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOU	ORATION SYS ITH PINE ISLA ION, FL 3332	ND ROAD			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
MANAGING	MEMBERS/MAN	AGERS:	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	SMITH, B. SCO	DEPENDENCE BOULEVARD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	WRIGHT, THE	DEPENDENCE BOULEVARD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM ( COSS, STEPH 6415 IDLEWIL CHARLOTTE, I	D RD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM ( PTASZEK, JAN 2616 YULE TR EDGEWATER	EE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	OCONNOR, JO	D ROAD, SUITE 109	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	IUPPENLATZ,	OD ROAD, SUITE 109	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: KIM SANDERS CONT 04/28/2006