## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L98000001576

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

FILED Apr 20, 2007 Secretary of State

| Current Principal Place of Business:        |   |                                  |           | New Principal Place of Business:            |   |  |
|---|---|----------------------------------|-----------|---|---|--|
|   | ON AVENUE<br>A BEACH, FL                              | 32117                            |           |   |   |  |
| Current Mailing Address:                    |   |                                  |           | New Mailing Address:                        |   |  |
|   | ON AVENUE<br>A BEACH, FL                              | 32117                            |           |   |   |  |
| FEI Number                                  | : 57-1072509  | FEI Number Applied For()         | FEI Nun   | nber Not App                                | Dicable ( ) Certificate of Status Desired ( )   |  |
| Name and                                    | d Address of (  | Current Registered Agent:        |           | Name and                                    | d Address of New Registered Agent:  |  |
| 1200 SOU<br>PLANTAT                         | ORATION SYS<br>ITH PINE ISLA<br>ION, FL 33324         | ND ROAD<br>4 US                  |           |   |   |  |
|   | e named entity<br>e of Florida.                       | submits this statement for the p | ourpose o | f changing i                                | its registered office or registered agent, or both,   |  |
| SIGNATUI                                    | RE:   |                                  |           |   |   |  |
|   | Electro   | nic Signature of Registered Age  | ∍nt       |   | Date  |  |
| MANAGING MEMBERS/MANAGERS:                  |   |                                  |           | ADDITIONS/CHANGES:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | SMITH, B. SCC   | DEPENDENCE BOULEVARD             |           | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | WRIGHT, THE   | DEPENDENCE BOULEVARD             |           | Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM (X) Change ( ) Addition<br>PLUMMER, DAVID<br>5401 EAST INDEPENDENCE BOULEVARD<br>CHARLOTTE, NC 28218 |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM (<br>COSS, STEPH<br>6415 IDLEWIL<br>CHARLOTTE, I | D RD.                            |           | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM (<br>PTASZEK, JAN<br>2616 YULE TR<br>EDGEWATER,  | EE DRIVE                         |           | Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM (X) Change ( ) Addition<br>DOBLER, SCOTT<br>24825 US HWY 19 NORTH<br>CLEARWATER, FL 33763            |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | OCONNOR, JO   | D ROAD, SUITE 109                |           | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | IUPPENLATZ,   | OD ROAD, SUITE 109               |           | Title:<br>Name:<br>Address:<br>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: MICHELE WILD MGRM 04/20/2007