

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L98000001576

FILED
Dec 15, 2011
Secretary of State

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

Current Principal Place of Business:

1720 MASON AVENUE
DAYTONA BEACH, FL 32117

New Principal Place of Business:

1720 MASON AVENUE
DAYTONA BEACH, FL 32117 US

Current Mailing Address:

6415 IDLEWILD ROAD
SUITE 109
CHARLOTTE, NC 28212

New Mailing Address:

4401 COLWICK ROAD
CHARLOTTE, NC 28211 US

FEI Number: 57-1072509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR
Name: SMITH, B. SCOTT
Address: 4401 COLWICK ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: MGR
Name: SMITH, DAVID B
Address: 4401 COLWICK ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: MGR
Name: COSPER, DAVID P
Address: 4401 COLWICK ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: VP
Name: RUSS, JOHN E III
Address: 4401 COLWICK ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: SECY
Name: COSS, STEPHEN K
Address: 4401 COLWICK ROAD
City-St-Zip: CHARLOTTE, NC 28211 YS

Title: ASAT
Name: O'CONNOR, JOSEPH D JR.
Address: 4401 COLWICK ROAD
City-St-Zip: CHARLOTTE, NC 28211 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: DAVID P. COSPER

MGR

12/15/2011

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