

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000005179

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** LEMONS CARMAX FLORIDA, LLC

**Current Principal Place of Business:**

5871 METGE AVENUE N.W.  
ALBANY, OR 97321

**New Principal Place of Business:**

**Current Mailing Address:**

1708 NW SPRINGHILL DRIVE  
ALBANY, OR 973219355

**New Mailing Address:**

**FEI Number:** 93-0780079

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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:** LEMONS, DANIEL  
**Address:** 31 SOUTH DRIVE  
**City-St-Zip:** HASTINGS ON HUDSON, NY 10706

**Title:** MGRM  
**Name:** LEMONS, DAVID  
**Address:** 1754 CHURKAR CT NW  
**City-St-Zip:** SALEM, OR 97304

**Title:** MGRM  
**Name:** BARDELL, LINDA D  
**Address:** 1708 NW SPRINGHILL DRIVE  
**City-St-Zip:** ALBANY, OR 97321

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 LEMONS

MRGM

01/10/2012

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