2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003269

Entity Name: AUTO ASSOCIATES GULF BREEZE, LLC

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2212 INWOOD DRIVE 3737 GULF BREEZE PARKWAY FORT WAYNE, IN 46815 GULF BREEZE, FL 32563

Current Mailing Address: New Mailing Address:

2212 INWOOD DRIVE P.O. BOX 15899 FORT WAYNE, IN 46815 FORT WAYNE, IN 46885

FEI Number: 26-2335456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD., STE. 101 TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

MGRM

GREENFIELD, JAY

FORT WAYNE, IN 46885

P.O. BOX 15899

(X) Change () Addition

MANAGING MEMBERS/MANAGERS:

MGRM () Delete e: GREENFIELD, JAY

Name: GREENFIELD, JAY Address: P.O. BOX 15899

City-St-Zip: FORT WAYNE, IN 468855899

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 HUSS, JASON

 Address:
 Address:
 P.O. BOX 15899

 City-St-Zip:
 City-St-Zip:
 FORT WAYNE, IN 46885

I hereby certify that the information supplied with this filing does not qualify 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: JASON A. HUSS MGRM 03/23/2009