

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000000003

Entity Name: FORMER HN AUTO, LLC

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

220 WILLOWBROOK LANE  
WEST CHESTER, PA 19382

## **New Principal Place of Business:**

1233 N GULFSTREAM AVE  
PH1  
SARASOTA, FL 34236

## **Current Mailing Address:**

1233 N. GULFSTREAM AVE.  
UNIT PH-1  
SARASOTA, FL 34236 US

## **New Mailing Address:**

FEI Number: 27-0510457      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BART SCOVILL, PLC  
1605 MAIN STREET  
SUITE 912  
SARASOTA, FL 34236 US

## **Name and Address of New Registered Agent:**

BITER, JESSE  
1233 N GULFSTREAM AVE  
PH1  
SARASOTA, FL 34236 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: JESSE BITER

04/11/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: BITER, JESSE  
Address: 1233 N. GULFSTREAM AVE., UNIT PH-1  
City-St-Zip: SARASOTA, FL 34236 US

Title: CFO  
Name: OLINGER, ALLISON  
Address: 1233 N GULFSTREAM AVE PH1  
City-St-Zip: SARASOTA, FL 34236 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: ALLISON OLINGER

CFO

04/11/2012

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