2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M98000001272

1. Entity Name

ASBURY AUTOMOTIVE JACKSONVILLE GP L.L.C.



FILED Apr 04, 2007 08:00 Al Secretary of State

Principal Place of Business

JACKSONVILLE, FL 32224

4306 PABLO OAKS CT.

Mailing Address

PO BOX 16469

JACKSONVILLE, FL 32245



03232007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3512660

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

DO NOT WRITE IN THIS SPACE

SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		

Filing Fee is \$50.00 Due by May 1, 2007

	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ASBURY VILLANOVA L.L.C. 1050 WESTLAKES DR. SUITE 300 BELWYN, PA 19312
ĺ	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
١	11. I hereby o	pertify that the information supplied with this filling does not qualify for the ex-

MANAGING MEMBERS/MANAGERS

000000689770 04/11/07-80048-018 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Winda L. Maluelly

Lindal Marlette

3.28.07

904.992-4110

Date

Daytime Phone #