

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000001278

1. Entity Name

FILED

01 FEB 15 PM 12:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MMR HOLDINGS, L.L.C.

Principal Place of Business

Mailing Address

1420 Spring Hill Road, Suite 525  
McLean, VA 22102 (Fairfax County)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

56-2107867

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

000003743580--7

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\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MEMBERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Manager  
CAR MMR L.L.C.  
1420 Spring Hill Road, Suite 525  
McLean VA 22102

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *John M. Weaver*  
By: Capital Automotive L.P.  
By: Capital Automotive REIT

Feb. 8, 2001 (703) 388-3075  
Date Daytime Phone #

CR2E083 (1/00)