2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# M99000001892

Entity Name: TRIANGLE AUTOMOTIVE GROUP LLC

Current Principal Place of Business:

4330 CRITTENDEN DRIVE
LOUISVILLE, KY 40209

New Principal Place of Business:

Current Mailing Address:

4330 CRITTENDEN DRIVE
LOUISVILLE, KY 40209

New Mailing Address:

FEI Number: 61-1356302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	HUBER, KENNETH L	
Address:	4330 CRITTENDEN DRIVE	
City-St-Zip:	LOUISVILLE, KY 40209	
Title:	MGRM	( ) Delete
Name:	FORMANEK, JAMES G	
Address:	4330 CRITTENDEN DRIVE	
City-St-Zip:	LOUISVILLE, KY 40209	
Title:	MGR	( ) Delete
Name:	KUHL, LEWIS D	
Address:	4330 CRITTENDEN DRIVE	
City-St-Zip:	LOUISVILLE, KY 40209	
Title:	MGR	( ) Delete
Name:	GISH, JAMES L	
Address:	4330 CRITTENDEN DRIVE	
City-St-Zip:	LOUISVILLE, KY 40209	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGR	(X) Change ( ) Addition
Name:	HUBER, LESLIE E	
Address:	4330 CRITTENDEN DRIVE	
City-St-Zip:	LOUISVILLE, KY 40209	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LESLIE E. HUBER SECR 04/30/2002

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