2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000105166

Entity Name: AUTO CREDIT OF JACKSONVILLE, LLC

Current Principal Place of Business:

6255 LAKE GRAY BLVD STE 2 JACKSONVILLE. FL 32244

Current Mailing Address:

701 RIVERSIDE PARK PLACE SUITE 310 JACKSONVILLE, FL 32204

FEI Number: 27-3647818 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACKMAN, JOANNE A 701 RIVERSIDE PARK PLACE SUITE 310 JACKSONVILLE, FL 32204 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

FILED Jan 13, 2014

Secretary of State

CC3378936513

Authorized Person(s) Detail:

Title PCOO Title EVP

Name WIMBERLY, R.GLYNN Name LANE, RUSSELL T

Address 701 RIVERSIDE PARK PLACE, SUITE Address 701 RIVERSIDE PARK PLACE, SUITE

City-State-Zip: JACKSONVILLE FL 32204 City-State-Zip: JACKSONVILLE FL 32204

Title VP Title ST

Name LYNSKEY, BRIAN Name CURRY, JEFFERY S

Address 701 RIVERSIDE PARK PLACE, SUITE Address 701 RIVERSIDE PARK PLACE, SUITE

City-State-Zip: JACKSONVILLE FL 32204 City-State-Zip: JACKSONVILLE FL 32204

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

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