

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000054112

Entity Name: COASTAL STATES AUTOMOTIVE GROUP MANAGEMENT, LLC

Current Principal Place of Business:

265 DRIVERS WAY
HARDEEVILLE, SC 29927

Current Mailing Address:

265 DRIVERS WAY
HARDEEVILLE, SC 29927

FEI Number: 30-0867394

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YERGLER, JON C
215 N EOLA DRIVE
ORLANDO, FL 32801 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

Authorized Person(s) Detail :

Title MGR
Name PEACOCK AUTOMOTIVE, LLC
Address 265 DRIVERS WAY
City-State-Zip: HARDEEVILLE SC 29927

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.

SIGNATURE: DIANE REINHART

TREASURER

03/16/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date