

2025 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M98000001272

Entity Name: ASBURY AUTOMOTIVE JACKSONVILLE GP L.L.C.

Current Principal Place of Business:

2905 PREMIERE PARKWAY
SUITE 300
DULUTH, GA 30097-5240

Current Mailing Address:

2905 PREMIERE PARKWAY
SUITE 300
DULUTH, GA 30097-5240 US

FEI Number: 59-3512660

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MEMBER
Name ASBURY AUTOMOTIVE GROUP L.L.C.
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title PRESIDENT, CEO
Name HULT, DAVID W.
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title CFO
Name WELCH, MICHAEL
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title VP
Name BARRON, SIDNEY
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title VP
Name CLARA, DANIEL
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title VP
Name MEES, MATTHEW J.
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title VP
Name PARRILLI, AMANDA
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

Title TREASURER
Name REEVES, CHRIS
Address 2905 PREMIERE PARKWAY
SUITE 300
City-State-Zip: DULUTH GA 30097-5240

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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: DEAN CALLOWAY

SECRETARY

04/23/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	SECRETARY
Name	CALLOWAY, DEAN
Address	2905 PREMIERE PARKWAY SUITE 300
City-State-Zip:	DULUTH GA 30097-5240