2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000000465

1. Entity Name
EPHRAIM HOLDINGS, LLC

Principal Place of Business	Mailing Address
213 SHOREWOOD DRIVE C/O WILLIAMW. CURTAS TAVARES, FL 32778	213 SHOREWOOD DRIVE C/O WILLIAMW. CURTAS TAVARES, FL 32778

DO NOT WRITE IN THIS SPACE

01192006No Chg-LLC CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CURTAS, WILLIAM W
213 SHOREWOOD DRIVE
TAVARES, FL 32778

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	EPHRAIM, CHARLES L
STREET ADDRESS	2130 SHERIDAN ROAD
CITY-ST-ZIP	HIGHLAND PARK, IL 60035
TITLE	MGRM
NAME	CURTAS, WILLIAM W
STREET ADDRESS	213 SHERWOOD DRIVE
CITY-ST-ZIP	TAVARES, FL 32778
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ 2-13-06 (352) 742-9926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

WILLIAM W. CURTAS, MANAGING MEMBER