2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000002411

1. Entity Name SONNY BOY, L.L.C.



Principal Place of Business

ATTN: RICHARD GEORGE 1415 W. 22ND ST., #500 OAK BROOK, IL 60523 Mailing Address

ATTN: RICHARD GEORGE 1415 W. 22ND ST., #500 OAK BROOK, IL 60523 FILED Feb 18, 2008 08:00 AM Secretary of State



02142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 36-4364601 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

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

DO NOT WRITE IN THIS SPACE

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 $\mathcal{R}^{*}(\mathcal{C} \geq \psi)$	
12.	12.0	

SIGNATURI

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000830666 02/26/08-80092-018 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	GEORGE, JAMES C
STREET ADDRESS	PO BOX 265639
CITY-ST-ZIP	DAYTONA BEACH, FL 32126
TITLE	MGRM
NAME	GEORGE, RICHARD W
STREET ADDRESS	347 RIDGE AVE.
CITY-ST-ZIP	CLARENDON HILLS, IL 60514
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11: I bareby	certify that the information supplied with this filling does not qualify for the e

DO NOT WRITE IN THIS SPACE

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 flability company or the receiver or trustee empowered execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/15/08

630-590-633

Daytime Phone #