2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000010588

1. Entity Name COLONIAL PARTNERS, L.L.C.



FILED Jan 31, 2008 08:00 AM Secretary of State

Principal Place of Business

27753 KINGS KEW BONITA SPRINGS, FL 34134 Mailing Address

27753 KINGS KEW

BONITA SPRINGS, FL 34134



01262008 No Chg-LLC

CR2E083 (12/07)

4,	FEI Number
	59-3752787

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORRION, ROBERT R 27753 KINGS KEW BONITA SPRINGS, FL 34134

DO NOT WRITE IN THIS SPACE

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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				
Signature, typed or printed name of registered agent and title if applicable. (NO		(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE NOW!It FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	CORRION, ROBERT R			
STREET ADDRESS	27753 KINGS KEW		1 1,70,70,70,70,70,70	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134		U00000808460 02/07/08-80050-001 138.75	
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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:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

1-25-08

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