

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90133 023 ***138.75

DOCUMENT # L02000003827					
1. Entity Name MANSNEILL, L.L.C.					
Principal Place of Business 8500 FOWLER AVE. PENSACOLA, FL 32534			Mailing Address 8500 FOWLER AVE. PENSACOLA, FL 32534		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 43-1951373	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent O'NEILL, JOHN M 8500 FOWLER AVE. PENSACOLA, FL 32534			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
O'NEILL, JOHN M 8500 FOWLER AVE. PENSACOLA, FL 32534			FL Zip Code		
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 2/29/08		
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			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ONEILL, JOHN M III 8500 FOWLER AVE. PENSACOLA, FL 32534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM John Michael O'Neill, III 8500 Fowler Avenue Pensacola, FL 32534	
Delete	☐		Change Addition	☒ ☐	
Delete	☐		Change Addition	☐ ☐	
Delete	☐		Change Addition	☐ ☐	
Delete	☐		Change Addition	☐ ☐	
Delete	☐		Change Addition	☐ ☐	
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:			John Michael O'Neill, III 2/29/08 (850) 484-7977		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

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