2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000020771

1. Entity Name
BATTREALL HOLDINGS, L.L.C.

Principal Place of Business	Mailing Address
199 KAHIKI DRIVE TAVERNIER, FL 33070	199 KAHIKI DRIVE TAVERNIER, FL 33070

02042005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2372591

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BATTREALL, CATHY
199 KAHIKI DR
TAVERNIER, FL 33070

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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: Cathy Battreall 2-5-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

U00000220255
02/08/05-80061-010 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BATTREALL, CATHY C
STREET ADDRESS	199 KAHIKI DRIVE
CITY-ST-ZIP	TAVERNIER, FL 33070
TITLE	MGRM
NAME	BATTREALL, MARC D
STREET ADDRESS	199 KAHIKI DRIVE
CITY-ST-ZIP	TAVERNIER, FL 33070
TITLE	
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CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Cathy Battreall 2-5-05 305-852-1874
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #