


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jul 20, 2005 08:00 AM
Secretary of State**

DOCUMENT # L02000027814 1. Entity Name CONLEY CLAN, LLC	
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Principal Place of Business 26603 S.W. 173RD PLACE HOMESTEAD, FL 33031	Mailing Address 26603 S.W. 173RD PLACE HOMESTEAD, FL 33031
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DO NOT WRITE IN THIS SPACE



07162005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 13-4221218	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent LEDER, NATHAN I 5200 BLUE LAGOON DRIVE, SUITE 600 MIAMI, FL 33031

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.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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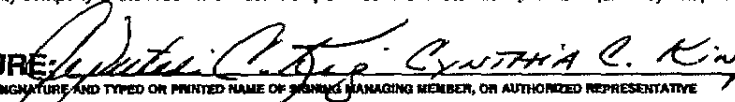
Filing Fee is \$50.00 Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SMITH, ELIZABETH ANN 26603 S.W. 173RD PLACE HOMESTEAD, FL 33031
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UN0000373641
07/20/05-80001-005 50.00

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:  CYNTHIA C. KING <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	7/15/05 <small>Date</small>	828-255-9985 <small>Daytime Phone #</small>
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