2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 14, 2007 08:00 AM Secretary of State

1. Entity Name

MCCALL'S HOLDINGS, LLC



Principal Place of Business

Mailing Address

2911 NE PINE ISLAND ROAD CAPE CORAL, FL 33 909-6513 2911 NE PINE ISLAND ROAD CAPE CORAL, FL 33 909-6513



DO NOT WRITE IN THIS SPACE

01272007 No Chg-LLC CR2E083 (11/05)

4.	FEI Number		Applied For
	02-0659241		Not Applicable
5.	Certificate of Status Desired		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FULLENKAMP, DENNIS J 2911 NE PINE ISLAND ROAD CAPE CORAL, FL 33909

DO NOT WRITE IN THIS SPACE

the obliga	a hamed entity submits this statement for the purpose of char- tions of registered agent.	and the residence of the second of the secon	ver, ar the claim of Florida. Fact minimal mills, and accep	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
F	iling Fee Is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FULLENKAMP, DENNIS 2911 NE PINE ISLAND ROAD CAPE CORAL, FL 33909			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000635411 02/23/07-80013-012 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		IN	IN THIS SPACE	
TITLE Name Street address City-St-Zip				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicate limited ti	certify that the information supplied with this filing does not don this report is true and accurate and that my signature sability company or the receiver or trustee empowered to exe	qualify for the exemptions contained in Chapter 1 hall have the same legal effect as if made under of the contract of the cont	 Florida Statutes. I further certify that the information bath; that I am a managing member or manager of the da Statutes. 	

AUTHORIZED REPOSSENTATIVE