

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007730

Entity Name: KILDARE INVESTMENT, LLC

FILED
Jun 01, 2005
Secretary of State

Current Principal Place of Business:

C/O WILLIAM P. COLSON
203 NORTH LA SALLE STREET, 15TH FL, #1500
CHICAGO, IL 60601

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM P. COLSON
203 NORTH LA SALLE STREET, 15TH FL, #1500
CHICAGO, IL 60601

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

COLSON, WILLIAM P
3105 STRINGFELLOW
ST JAMES CITY, FL 33956 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: COLSON, WILLIAM P MGR
Address: 203 N. LASALLE SUITE 1500
City-St-Zip: CHICAGO, IL 60601 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: LAVELLE, MARATHA J
Address: 203 N. LASALLE SUITE 1500
City-St-Zip: CHICAGO, IL 60601 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: WILLIAM P. COLSON

MGRM

06/01/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date