

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90045 027 ****50.00

DOCUMENT # L04000000226

1. Entity Name
DONARRA THOROUGHBREDS, LLC



Principal Place of Business
38 PEACEABLE STREET
RIDGEFIELD, CT 06877

Mailing Address
38 PEACEABLE STREET
RIDGEFIELD, CT 06877

20028474



2. Principal Place of Business
10475 NW 28TH PLACE

3. Mailing Address
10475 NW 28TH PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072005 Chg-LLC CR2E083 (10/03)

City & State
OCALA, FLORIDA

City & State
OCALA, FLORIDA

4. FEI Number
56-2425919

Applied For
Not Applicable

Zip
34482

Country
USA

Zip
34482

Country
USA

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

6. Name and Address of Current Registered Agent

DONOHUE, MARYANN G
657 BRIDGEWAY LANE
NAPLES, FL 33963

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME DONOHUE, JOHN K
STREET ADDRESS 38 PEACEABLE STREET
CITY-ST-ZIP RIDGEFIELD, CT 06877

TITLE MGRM ☐ Delete
NAME DONOHUE, MARYANN G
STREET ADDRESS 38 PEACEABLE STREET
CITY-ST-ZIP RIDGEFIELD, CT 06877

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME DONOHUE, JOHN K
STREET ADDRESS 10475 NW 28TH PLACE
CITY-ST-ZIP OCALA, FL 34482

TITLE MGRM ☒ Change ☐ Addition
NAME DONOHUE, MARYANN G
STREET ADDRESS 10475 NW 28TH PLACE
CITY-ST-ZIP OCALA, FL 34482

TITLE ☐ Change ☐ Addition
NAME
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

April 6, 2005 **203 855-6002**