2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020138

Entity Name: L & L HOLDING COMPANY, LLC

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

DANIEL LOGAN-BOOSE CASEY CIKLIN ET AL 515 N FLAGLER DR, 19TH FLOOR WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

DANIEL LOGAN-BOOSE CASEY CIKLIN ET AL
515 N FLAGLER DR, 19TH FLOOR
WEST PALM BEACH, FL 33401
DANIEL LOGAN
17888 BRIAN WAY
JUPITER, FL 33478

FEI Number: 20-0863143 FEI Number Applied For () 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: Name and Address of New Registered Agent:

LOGAN, M. DANIEL ESQ BOOSE CASEY CIKLIN ET AL 515 N FLAGLER DR, 19TH FLOOR WEST PALM BEACH, FL 33401 US LOGAN, M. DANIEL ESQ 17888 BRIAN WAY JUPITER, FL 33478 US

ADDITIONS/CHANGES:

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: 05/02/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 LOGAN, DANIEL
 Name:
 LOGAN, DANIEL

 Address:
 515 N FLAGLER DR, 19TH FLOOR
 Address:
 17888 BRIAN WAY

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:
 JUPITER, FL 33478

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: DANIEL LOGAN MGR 05/02/2005