

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031836

Entity Name: CONNAUGHT LOSE, LLC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

3111 NORTH UNIVERSITY DRIVE
SUITE 115
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

3111 NORTH UNIVERSITY DRIVE
SUITE 115
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 35-2230549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNELL, JOHN F
9810 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 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/MANAGERS:

Title: MGRM () Delete
Name: O'CONNELL, JOHN F
Address: 3111 NORTH UNIVERSITY DRIVE SUITE 115
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGRM () Delete
Name: NAUGHTON, JOHN
Address: 3111 NORTH UNIVERSITY DRIVE SUITE 115
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOHN O'CONNELL

MGRM

04/28/2006

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