

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047601

Entity Name: MCNEIL FAMILY, LLC

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

4393 COMMONS DRIVE EAST
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

4393 COMMONS DRIVE EAST
DESTIN, FL 32541

New Mailing Address:

FEI Number: 27-0094904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, STEVEN K
4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541 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: MGR () Delete
Name: MCNEIL, JOHN A JR.
Address: 4393 COMMONS DRIVE EAST
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: BARNARD, BARBARA M
Address: 4393 COMMONS DRIVE EAST
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: MCNEIL, JOHN G
Address: 4393 COMMONS DRIVE EAST
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: JONES, FRANCES M
Address: 4393 COMMONS DRIVE EAST
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: MCNEIL, MAMIE E
Address: 4393 COMMONS DRIVE EAST
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: MCNEIL, MICHAEL B
Address: 4393 COMMONS DR EAST
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

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

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

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

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

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 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: JAM

MGR

04/25/2008

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