

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064875

Entity Name: CONCH HOLDINGS, LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

365 TAFT-VINELAND ROAD
SUITE 105
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

365 TAFT-VINELAND ROAD
SUITE 105
ORLANDO, FL 32824

New Mailing Address:

FEI Number: 20-1568199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOUST, KATHLEEN M
17 S ORLANDO AVENUE
KISSIMMEE, FL 34741 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: RUSSELL, JOHN H
Address: 2645 CHEROKEE ROAD
City-St-Zip: ST. CLOUD, FL 34772

Title: MGRM () Delete
Name: RUSSELL, JOHN B
Address: 2645 CHEROKEE ROAD
City-St-Zip: ST. CLOUD, FL 34772`

Title: MGRM () Delete
Name: MADISON, PETER D
Address: 4908 OAK ISLAND ROAD
City-St-Zip: ORLANDO, FL 32809

Title: MGR () Delete
Name: CHALIFOUX, DEBBE R
Address: 6105 LAKE DIZZIE DR.
City-St-Zip: ST. CLOUD, UT 84771

Title: MGRM () Delete
Name: ROBERTS, CHARLES F
Address: 5585 2ND AVE.
City-St-Zip: KEY WEST, FL 33040

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
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: DEBBE R CHALIFOUX

MGR

04/23/2009

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