2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000044250

Entity Name
 1503 DONNELLY LLC



Principal Place of Business

1503 DONNELLY STREET MOUNT DORA, FL 32757 Mailing Address 308 F 5TH AV

308 E 5TH AVE MOUNT DORA, FL 32757

211

FILED Jan 25, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2794614

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

, G. EDWARD

6. Name and Address of Current Registered Agent

CLEMENT, G. EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757 DO NOT WRITE IN THIS SPACE

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.	

SIGNATUR

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, 2007 U00000602809 01/26/07-80102-018 50.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR CLEMENT, G. EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757 MGR	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	POTTER, DEL G 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY+ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	
NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling does not qualify for the ex		

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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

S. Edur Clal

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352.387.4/8

Daytme Phone #