2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 26, 2007 08:00 AM Secretary of State

DC		IN	I 🗆 N	JT.	#	ı	<u> </u>	በበ	M	ባደ	R	ጻሰ	12
ω	<i>'</i> しし	JIV	ICI	VI	#	ட	\mathbf{u}	vu	v	vu	O	Ju	,_

1. Entity Name

DONÉGAL PUBS (USA) LLC



Principal Place of Business

Mailing Address

112 YACHT CLUB DRIVE

112 YACHT CLUB DRIVE

#1

DO NOT WRITE IN THIS SPACE

NORTH PALM BEACH, FL 33408 US

NORTH PALM BEACH, FL 33408 US



04232007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	20-3427872

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

MCGLINCHEY, RAYMOND P 112 YACHT CLUB DRIVE

#4

NORTH PALM BEACH, FL 33408

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.	

SIGNATURE

Signature, typed or printed name of registered agent and tit

(NOTE Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	9. MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCGLINCHEY, RAYMOND P					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCGLINCHEY, PAUL 112 YACHT CLUB DRIVE NORTH PALM BEACH #4, FL 33408					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY+ST-ZIP						
TITLE NAME STREET ADDRESS						

U00000735873 05/10/07-80051-020 150.00

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 1 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 receiptor or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/21/07

Daytime Phone #