2008 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Jan 11, 2008 08:00 Al Secretary of State DOCUMENT # L05000111794 1. Entity Name JOHN T. BRENNAN, L.L.B. PLC Principal Place of Business Mailing Address 3925 ELEVEN MILE ROAD 3925 ELEVEN MILE ROAD FT. PIERCE, FL 34945 FT. PIERCE, FL 34945 CR2E083 (12/07) 01092008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number 55-0910077 Not Applicable 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BRENNAN, JOHN T DO NOT WRITE 3925 ELEVEN MILE ROAD FT. PIERCE, FL 34945 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 title if applicable, (NOTE Registered Agent signature required when reinstating) 000000779785 01/11/08-80050-019 138.75 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME BRENNAN, JOHN T STREET ADDRESS 3925 S. ELEVEN MILE RD FORT PIERCE, FL 34945 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS City-ST-ZIP TITLE NAME

11. I nereby 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

YPED OR PRINTED NAME OF SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP