2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000024754

1. Entity Name DKN HOLDINGS, LLC



FILED May 05, 2008 8:00 am Secretary of State

05-05-2008 90042 027 ***138.75

Principal Place of Business

1358 FRUITVILLE RD. SUITE 310 SARASOTA, FL 34236 Mailing Address

1358 FRUITVILLE RD. SUITE 310 SARASOTA, FL 34236 60039374



04302008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4911471

Applied For Not Applic

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILSON, MICHAEL J 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236

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 ac
	the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rainstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

v 9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
, NAMÉ	LURIA, DAVID A
STREET ADDRESS	1358 FRUITVILLE RD SUITE 310
CITY+ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
_STREET-ADDRESS.	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informat 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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