

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000096625

Entity Name: CHADWICKS, LLC

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

14135 HAPPY HILL ROAD
DADE CITY, FL 33525

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2249
DADE CITY, FL 33526

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADANI, SHEADA
37837 MERIDIAN AVENUE
SUITE 100
DADE CITY, FL 33525 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: MGR () Delete
Name: MADANI, BEHROUZ
Address: 14135 HAPPY HILL ROAD
City-St-Zip: DADE CITY, FL 33525

Title: MGR () Delete
Name: MADANI, CLAUDIA E
Address: 14135 HAPPY HILL ROAD
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MADANI, BEHROUZ
Address: POST OFFICE BOX 2249
City-St-Zip: DADE CITY, FL 33526

Title: MGR (X) Change () Addition
Name: MADANI, CLAUDIA E
Address: POST OFFICE BOX 2249
City-St-Zip: DADE CITY, FL 33526

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: CLAUDIA MADANI

MGR

04/10/2008

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