

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118411

FILED
Apr 07, 2008
Secretary of State

Entity Name: MCKINNON MANAGEMENT, LLC

Current Principal Place of Business:

102 S. MAIN STREET
CRESCENT CITY, FL 32112

New Principal Place of Business:

102 S MAIN STREET
CRESCENT CITY, FL 32178

Current Mailing Address:

102 S. MAIN STREET
CRESCENT CITY, FL 32112

New Mailing Address:

POST OFFICE BOX 1223
PALATKA, FL 32178

FEI Number: 20-8021705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, DAVID A
5095 S. WASHINGTON AVENUE
SUITE 201
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

HARRISON, DAVID A
379 CHENEY HIGHWAY
#210
TITUSVILLE, FL 32780 US

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: DAVID A HARRISON

04/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCKINNON, LEON
Address: 102 S. MAIN STREET
City-St-Zip: CRESCENT CITY, FL 32112

Title: MGR () Delete
Name: SCHOLL, BARBARA
Address: 102 S. MAIN STREET
City-St-Zip: CRESCENT CITY, FL 32112

Title: MGR (X) Delete
Name: MCKINNON, GARY
Address: 102 S. MAIN STREET
City-St-Zip: CRESCENT CITY, FL 32112

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHOLL, BARBARA
Address: POST OFFICE BOX 1223
City-St-Zip: PALATKA, FL 32178

Title: MGRM (X) Change () Addition
Name: MCKINNON, GARY
Address: POST OFFICE BOX 1223
City-St-Zip: PALATKA, FL 32178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BARBARA SCHOLL

MGRM

04/07/2008

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