

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000041197

**FILED**  
**Jan 28, 2008**  
**Secretary of State**

**Entity Name:** HAGAN O'REILLY'S IRISH PUB AND RESTAURANT, LLC

**Current Principal Place of Business:**

8057 CANYON LAKE CIRCLE  
ORLANDO, FL 32835 US

**New Principal Place of Business:**

1444 BELFOIRE WAY  
WINDEMERE, FL 34786 US

**Current Mailing Address:**

8057 CANYON LAKE CIRCLE  
ORLANDO, FL 32835 US

**New Mailing Address:**

1444 BELFOIRE WAY  
WINDEMERE, FL 34786 US

**FEI Number:** 20-8949947

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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: MILLER, MARY C  
Address: 8057 CANYON LAKE CIRCLE  
City-St-Zip: ORLANDO, FL 32835 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MILLER, MARY C  
Address: 1444 BELFIORE WAY  
City-St-Zip: WINDEMERE, FL 34786 US

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: MARY CLAIRE MILLER

MGR

01/28/2008

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