
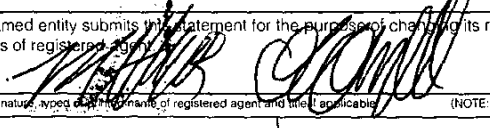
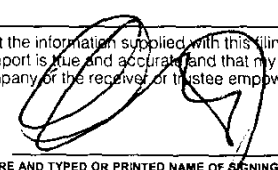


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90111 035 ***138.75

DOCUMENT # L98000000017 1. Entity Name CONAILL HOLDINGS LLC			
Principal Place of Business 321 CROTON WAY WEST PALM BEACH, FL 33401 610 clematis street / PO BOX 3917		Mailing Address 321 CROTON WAY WEST PALM BEACH, FL 33401 60023440	
2. Principal Place of Business - No P.O. Box # Apt. 808 Suite, Apt. #, etc. West palm beach FL		3. Mailing Address Suite, Apt. #, etc. West palm beach FL	
City & State 33401 USA		City & State West palm beach FL	
Zip 33401		Zip 33402	
Country USA		Country USA	
4. FEI Number 65-0799589		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		03312008 Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent O'CONNELL, PHIL D JR 321 CROTON WAY WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name Patrick O'Connell Street Address (P.O. Box Number is Not Acceptable) 179 Lake Arbor Drive City Palm Springs FL Zip Code 33461	
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  DATE 4/10/08 <small>Signature, typed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'CONNELL, PHIL D JR 321 CROTON WAY WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'CONNELL, PHIL D JR 321 CROTON WAY WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'CONNELL, LINDA L 321 CROTON WAY WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'CONNELL, LINDA L 321 CROTON WAY WEST PALM BEACH, FL 33401 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'CONNELL, LINDA L 321 CROTON WAY WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'CONNELL, LINDA L 321 CROTON WAY WEST PALM BEACH, FL 33401 <input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby 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.			
SIGNATURE: 		Date 4/9/08 Daytime Phone # 346-9051	