


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

**FILED**  
**May 06, 2008 8:00 am**  
**Secretary of State**

05-06-2008 90006 018 \*\*\*138.75

<b>DOCUMENT # M05000001486</b>	
1. Entity Name <b>HARRAH BROTHERS HOLDINGS, LLC</b>	

Principal Place of Business <b>5 REGAL OAKS BARBOUSVILLE WV 25504</b>	Mailing Address <b>5 REGAL OAKS BARBOUSVILLE WV 25504</b>
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1st MOORE : CR2E083 (10/07)

2. Principal Place of Business - No P.O. Box # <b>1975 Wiltshire Blvd</b>	3. Mailing Address <b>1975 Wiltshire Blvd</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>Huntington, WV</b>	City & State <b>Huntington, WV</b>
Zip <b>25701</b>	Zip <b>25701</b>
Country <b>US</b>	Country <b>US</b>

4. FEI Number <b>20-1526385</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>CHESSER, MIKE 1201 EGLIN PARKWAY SHALIMAR FL 32579</b>
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7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
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<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008, Fee Will Be \$538.75</b> <b>Make Check Payable to Florida Department of State</b>
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9. MANAGING MEMBERS / MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HARRAH, RYAN 5 REGAL OAKS BARBOUSVILLE WV 25504 <input checked="" type="checkbox"/> Delete <b>Effective 30 Apr 2008</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HARRAH, JOHN JR 321 BREAM AVE., #204 FT. WALTON BEACH FL 32548 <input type="checkbox"/> Delete <b>Change of Address</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>1975 Wiltshire Blvd Huntington, WV 25701</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<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 Section 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: 	<b>Ryan E. Harrah</b>	<b>17 Apr 2008</b>	<b>304-736-1144</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	Daytime Phone #