## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## DOCUMENT # M9800000207

PATRIOT HOLDINGS, LLC

May 02, 2005 08:00 AM Secretary of State

**FILED** 

Principal Place of Business

Mailing Address

2175 NORTH CALIFORNIA BLVD., SUITE 1000 WALNUT CREEK, CA 94596

2175 NORTH CALIFORNIA BLVD., SUITE 1000 WALNUT CREEK, CA 94596



04252005 No Cha-LLC

CR2E083 (10/03)

4. FEI Number 91-1862241

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY

1201 HAYS STREET TALLAHASSEE, FL 32301-2525

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

4/25/05

Judy L. Collins

(925) 296-2000

Daytime Phone #

tile obliga	tions of registered agent.		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstalling	g) DATE
F	iling Fee is \$50.00 ue by May 1, 2005		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		· · · · · · · · · · · · · · · · · · ·
NAME	TRUCHAN, JORDAN M		
STREET ADDRESS	2175 NORTH CALIFORNIA BLVD., SUITE 1000		
CITY-ST-ZIP	WALNUT CREEK, CA 94596		
TITLE	MGRM		
NAME	COLLINS, JUDY L		100000356449
STREET ADDRESS	2175 NORTH CALIFORNIA BLVD., SUITE 1000		U00000356449 05/04/05-80036-008 50.00
CITY-ST-ZIP	WALNUT CREEK, CA 94596	·	The second of th
TITLE	MGRM		
NAME	JONES, SAUNDERS A		
STREET ADDRESS	2175 NORTH CALIFORNIA BLVD., SUITE 1000	n l	O NOT WRITE
CITY-ST-ZIP	WALNUT CREEK, CA 94596		O INOT WHITE
TITLE		i in	I THIS SPACE
NAME		##.Y	I IIIO OI AOL
STREET ADDRESS		Ĭ	
CITY-ST-ZIP		V & ANDROVANIA MARK	
TITLE			
NAME			
STREET ADDRESS		ŀ	
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS		ł	
CITY-ST-ZIF		<u> </u>	
indicated	certify that the information supplied with this filing does not qui I on this report is true and accurate and that my signature shal ability company or the receiver or trustee empowered to execu	have the same legal effect as if made under	oath: that I am a managing member or manager of the

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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