


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2005 08:00 AM
Secretary of State

DOCUMENT # M98000001038

1. Entity Name
MARGARITAVILLE HOLDINGS LLC



Principal Place of Business: **256 WORTH AVENUE STE Q
 PALM BEACH, FL 33480**

Mailing Address: **C/O GELFAND, RENNERT & FELDMAN
 1880 CENTURY PARK E, #1600
 LOS ANGELES, CA 90067**

DO NOT WRITE IN THIS SPACE



01112005No Chg-LLC CR2E083 (10/03)

4. FEI Number 58-2339130	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
 526 E. PARK AVENUE
 TALLAHASSEE, FL 32301**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUFFETT, JIMMY 1880 CENTURY PARK EAST, #1600 LOS ANGELES, CA 90067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAUFMAN, HOWARD 9200 SUNSET BLVD., STE 530 LOS ANGELES, CA 90069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RENNERT, IRWIN 1880 CENTURY PARK EAST, #1600 LOS ANGELES, CA 90067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KATZ, JOEL A 3290 NORTHSIDE PARKWAY, #400 ATLANTA, GA 30327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COHLAN, JOHN 256 WORTH AVE., STE Q PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000194990
 01/26/05-80010-016 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Kevin J. [Signature]* *1/11/05*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #