

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001038

**FILED**  
**Feb 20, 2007**  
**Secretary of State**

**Entity Name:** MARGARITAVILLE HOLDINGS LLC

**Current Principal Place of Business:**

256 WORTH AVENUE STE Q  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

6800 LAKEWOOD PLAZA DRIVE  
ORLANDO, FL 32819

**FEI Number:** 58-2339130

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: BUFFETT, JIMMY  
Address: 1880 CENTURY PARK EAST, #1600  
City-St-Zip: LOS ANGELES, CA 90067

Title: MGR ( ) Delete  
Name: COHLAN, JOHN  
Address: 256 WORTH AVE., STE Q  
City-St-Zip: PALM BEACH, FL 33480

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIC FORWARD

CFO

02/20/2007

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