


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 12, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90057 049 \*\*\*\*\*5.00  
 05-12-2004 90006 049 \*\*\*\*\*50.00

**DOCUMENT # L00000001260**  
 1. Entity Name  
**KERSEY HOLDINGS, L.C.**



Principal Place of Business 114 QUEEN CATHERINA FT PIERCE, FL 34949	Mailing Address 114 QUEEN CATHERINA FT PIERCE, FL 34949
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**DO NOT WRITE IN THIS SPACE**



04122004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0987045	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  
**KERSEY, THOMAS A**  
**114 CATHERINA**  
**FT PIERCE, FL 34949**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00**  
**Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KERSEY, THOMAS 114 CATHERINA FT PIERCE, FL 34949
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 605, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_ *4/12/04 772-971-2102*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #