

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017410

FILED
Apr 29, 2008
Secretary of State

Entity Name: KANAYA, LLC

Current Principal Place of Business:

505 SOUTH ORANGE AVENUE
SARASOTA, FL 34236

New Principal Place of Business:

505 SOUTH ORANGE AVENUE
UNIT 1501
SARASOTA, FL 34236

Current Mailing Address:

515 SOUTH WASHINGTON BOULEVARD
SARASOTA, FL 34236

New Mailing Address:

505 SOUTH ORANGE AVENUE
UNIT 1501
SARASOTA, FL 34236

FEI Number: 22-3859907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALTSAS, HARVEY
515 SOUTH WASHINGTON BOULEVARD
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

HERRIG, LARRY
505 SOUTH ORANGE AVENUE
UNIT 1501
SARASOTA, FL 34236 US

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: LARRY HERRIG

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KALTSAS, HARVEY
Address: 1837 BUCCANEER DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: MGRM (X) Delete
Name: KALTSAS, CYNTHIA
Address: 456 AVENIDA DEL MAYO
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HERRIG, LARRY
Address: 505 SOUTH ORANGE AVENUE, UNIT 1501
City-St-Zip: SARASOTA, FL 34236

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

I hereby certify that the information supplied with this filing does not qualify 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: LARRY HERRIG

MGRM

04/29/2008

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