

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90027 001 ****50.00

DOCUMENT # L03000020569 1. Entity Name KITSON & PARTNERS, GOLF X, LLC					
Principal Place of Business 9055 IBIS BLVD WEST PALM BEACH, FL 33412 US			Mailing Address 9055 IBIS BLVD WEST PALM BEACH, FL 33412 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		04192007 Chg-LLC CR2E083 (12/06)	
City & State		City & State		4. FEI Number 20-0041369	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SPEER, GEORGE 9055 IBIS BLVD WEST PALM BEACH, FL 33412				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, 2007				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KITSON & PARTNERS, LLC 9055 IBIS BOULEVARD WEST PALM BEACH, FL 33412		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KITSON, LLC 9055 IBIS BOULEVARD WEST PALM BEACH, FL 33412	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					
SYDNEY W. KITSON, MANAGER OF KITSON, LLC					
SIGNATURE: _____			4-23-07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

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