

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067124

Entity Name: FAT DADDY KOKOPELLI, LLC

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

16201 CROWN ARBOR WAY
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

16201 CROWN ARBOR WAY
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 11-3754383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECHOLS, LARRY A
6100 ESTERO BLVD.
FORT MYERS BEACH, FL 33931 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: MGRM () Delete
Name: SMITH, ROBERT J
Address: 16201 CROWN ARBOR WAY
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM () Delete
Name: MURPHY, WILLIAM D JR.
Address: 8850 NEW CASTLE DRIVE
City-St-Zip: FORT MYERS, FL 33908

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: WILLIAM D MURPHY JR

MGRM

04/04/2007

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