

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 07, 2007 8:00 am
Secretary of State

02-14-2007 90221 025 ****50.00

DOCUMENT # L05000121807					
1. Entity Name KINGSLEY PROPERTIES I, LLC					
Principal Place of Business 1550 S. GOLDENEYE LN. HOMESTEAD FL 33035-1027			Mailing Address 1550 S. GOLDENEYE LN. HOMESTEAD FL 33035-1027		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-4199021	
				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GUNDERSON, LEIF K 1550 S. GOLDENEYE LN. HOMESTEAD FL 33035-1027			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 _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature is required when reappointing)					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR GUNDERSON, LEIF K 1550 S. GOLDENEYE LN. HOMESTEAD FL 33035-1027 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.					
SIGNATURE: <u><i>Leif K. Gunderson</i></u> Mgr			Date: <u>2-1-07</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

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1st MOORE CR2E083 (10/06)