2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000006745 1. Entity Name KAGELL LLC							FILED				
							01 APR 19 AHII: 53				
							SECRETARY OF STATE				
Principal Place of Business Mailing Address 1247 ASPEN LANE 1247 ASPEN LANE WAUCHULA FL 33873 WAUCHULA FL 33873							T,	SECRETARY OF STAT ALLAHASSEE, FLORI	ĐΑ		
			•								
2. Principal Place of Business 3. Mailing Address										 	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State		City & State				4. FEI N	umber 65-09996		oplied For		
Zip	Coun	iry	Zip	ntry		5. Certif	icate of Status Desired	\$5.00 Add Fee Require			
	6. Name and Ad	dress of Current Re	gistered Agent	<u>-</u>			7. Name	and Address of New Register	ed Agent		
Name										i	
VANCE, G		•			Street Address (P.O. Box Number is Not Acceptable)						
1247 ASPEN LANE WAUCHULA FL 33873					500004034735 -04/27/0101046012					= 4	
****			City ******5								
8. The above	named entity submits	s this statement for th	ne purpose of changing its	s register	ed office or	r registere	d agent, c	or both, in the State of Florida.			
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SIGNATURE _	Signature, typed or printed n	ame of registered agent and	title if applicable. (NO	TE: Registere	d Agent signat	ture required w	hen reinstatir	g) DA	TE		
			FILE N Make Check P		FEE IS \$ o Depart	=	State				
9.	M.	ANAGING MEMBERS		10.		2	i.How	ADDITIONS/CHANG		Addition	
TITLE NAME STREET ADDRESS	·		☐ Delete		E Et address	010	A E	- Manager Nance en have	☐ Change	Í	
CITY-ST-ZIP				_	-ST-ZIP		uchil		☐ Change	MA Addition	
TITLE NAME STREET ADDRESS		<i>,</i>	∟J Delete		E Et address	12	areta lua 47 A	spen de-	, Change	<u>⊮</u> Addition	
CITY-ST-ZIP	**	······	☐ Delete	TITL	-ST-ZIP		enage	ula, Fl. 33873	☐ Change	Addition	
NAME			Delete	NAM			eg	Valentine			
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP	55	40 C	Fl Dorodo ud, Fl. 33809		!	
TITLE			☐ Delete	TITLI		ma	11/1/10		Change	Addition	
NAME STREET ADDRESS				NAM Stre	et address	KV	40	El Dorado		ľ	
CITY-ST-ZIP					-ST-ZIP	Luk	ekn	· /~/		,	
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NAME STREET ADDRESS				NAM STRE	E Et address	Jan	ney A	. Value Meror			
CITY-ST-ZIP					-ST-ZIP	117	1. Fran	+ Mo. 63031			
TITLE .			☐ Delete	TITLE		Man	eger.	. Vance	Change	Addition	
NAME Ç			-	NAM		Lav	May P	. Vance	,'		
STREET ADDRESS CITY ZIP					ET ADDRESS -ST-ZIP	715	0. (1550	Freen Way Manor nt , Mo. 63031	•		
11. hereby co	ertify that the informa	tion supplied with thi	s filing does not qualify fo	r the exe	mption stat	ted in Sect	tion 119.0	7(3)(i), Florida Statutes. I further	certify that the in	nformation	
			at my signature shall have mpowered to execute this					oath; that I am a managing me ida Statutes.	moer or manage	er of the	

Daytime Phone #