

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004466

Entity Name: OLD KINGS PLAZA, LLC

FILED  
Apr 21, 2005  
Secretary of State

**Current Principal Place of Business:**

210 OLD KINGS RD SOUTH  
600  
FLAGLER BEACH, FL 32136

**New Principal Place of Business:**

**Current Mailing Address:**

210 OLD KINGS RD SOUTH  
600  
FLAGLER BEACH, FL 32136

**New Mailing Address:**

FEI Number: 59-3712132      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAMURIN, ALEKSANDR  
30 BUNKER LN  
PALM COAST, FL 32137      US

**Name and Address of New Registered Agent:**

SAMURIN, ALEKSANDR  
49 OLD OAK DRIVE SOUTH  
PALM COAST, FL 32137      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: ALEKSANDR SAMURIN

04/21/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: GORYUNOVA, TATYANA  
Address: 1569 OCEAN AVE #3A  
City-St-Zip: BROOKLYN, NY 11220

Title: MGRM ( ) Delete  
Name: SAMURIN, ALEKSANDR  
Address: 30 BUNKER LN  
City-St-Zip: PALM COAST, FL 32137

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: SAMURIN, ALEKSANDR  
Address: 49 OLD OAK DR SOUTH  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEKSANDR SAMURIN

MGRM

04/21/2005

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