## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L02000011225**

1. Entity Name

KELŚO ENTERPRISES, L.L.C.



Principal Place of Business

2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789

Mailing Address

2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789

## FILED Mar 17, 2004 8:00 am Secretary of State

03-17-2004 90274 014 \*\*\*\*50 00

24023637



03042004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number	Applied For
27-0021330	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, SOUTH & MILHAUSEN P.A. 2699 LEE ROAD, SUITE 120 C/O JEFFREY P. MILHAUSEN, ESQ. WINTER PARK FL 32789

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	REY P. MILHAUSEN, ESQ. PARK, FL 32789	IN THIS SPACE
the obligat	named entity submits this statement for the purpose of char ions of registered agent.	anging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)  DATE
Fi Di	iling Fee Is \$50.00 ue by May 1, 2004	
9. ,	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MILLER, J. GARY 2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WAGNER, CURTIS B 2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE		

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

NAME STREET ADDRESS CITY-ST-ZIP

J. Gary Miller, Manager

March 5, 2004

(407) 539-1638

Date

Daytime Phone #