

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000011225

1. Entity Name
KELSO 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**



03032005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-0021330

Applied For
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**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

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

TITLE
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CITY - ST - ZIP

U00000258755
03/10/05-80057-003 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____

J. Gary Miller, Manager 3/3/2005 (407) 539-1638

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #