

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 AUG 10 AM 9:58

DOCUMENT # L02000025655

1. Entity Name  
KINGSWAY, L.L.C.



Principal Place of Business  
127 N. KINGSWAY ROAD  
BRANDON, FL 33510

Mailing Address  
127 N. KINGSWAY ROAD  
BRANDON, FL 33510

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08042006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
52-2384280

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RILEY, STEVEN P  
4805 WEST LAUREL STREET, SUITE 230  
TAMPA, FL 33607

Name  
Judith S. Lambert  
Street Address (P.O. Box Number is Not Acceptable)  
669A West Lumsden Road  
City  
Brandon, Florida  
FL 33511

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

*Judith S. Lambert*

(NOTE: Registered Agent signature required when reinstating)

DATE

8/4/06

Amended AR is \$50.00

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
MGRM  
WATERMAN, KAREN J  
STREET ADDRESS  
127 N. KINGSWAY ROAD  
CITY - ST - ZIP  
BRANDON, FL 33510 ☒ Delete

TITLE  
NAME  
Manager Member  
Bruce D. Waterman  
STREET ADDRESS  
127 N. Kingsway Road  
CITY - ST - ZIP  
Brandon, Florida 33510 ☒ Change ☐ Addition

TITLE  
NAME  
MGRM  
WATERMAN, BRUCE D DMD,PA  
STREET ADDRESS  
127 N. KINGSWAY ROAD  
CITY - ST - ZIP  
BRANDON, FL 33510 ☒ Delete

TITLE  
NAME  
Manager Member  
Andrea D. Gordillo  
STREET ADDRESS  
127 N. Kingsway Road  
CITY - ST - ZIP  
Brandon, Florida 33510 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition  
800078986068  
08/22/06--01020--008 \*\*50.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

*Bruce D. Waterman*

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

8/4/06 (813) 684-8462

Date Daytime Phone #