2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000031041

1. Entity Name
KEHAYKE, LLC

Principal Place of Business	Mailing Address
7965 JACK JAMES DR. STUART, FL 34997	7965 JACK JAMES DR. STUART, FL 34997

DO NOT WRITE IN THIS SPACE

02202008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number 04-3747115	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

WENTWORTH, GEORGE E
7965 SW JACK JAMES DR
STUART, FL 34995

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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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000087320G
04/10/08-80068-015 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	P
NAME	WENTWORTH, GEORGE
STREET ADDRESS	7965 JACK JAMES DRIVE
CITY-ST-ZIP	STUART, FL 34997
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   3/24/08   772-263-9042

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #