2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000004319

1. Entity Name

KATHLEEN CHARTERS, L.L.C.

Principal Place of Business

Mailing Address

400 S. US HIGHWAY ONE SUITE #4 JUPITER. FL 33477 400 S. US HIGHWAY ONE

SUITE #4

JUPITER, FL 33477



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01152007 No Chg-LLC

CR2E083 (11/05)

FILED

Jan 18, 2007 08:00 AM

Secretary of State

4. FEI Number 42-1574373

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GIRVIN, D.R. ESQ OCEANSIDE PROFESSIONAL CENTRE 1080 EAST INDIANTOWN ROAD SUITE 102 JUPITER, FL 33477

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	The above named entity submits this statement for the purpose of changi- the obligations of registered agent.	ng its registered office or registered agent, or bo	oth, in the State of Florida.	I am familiar with, and accept
SI	GNATURE			DAYS.
	Signature, typed or printed name of registered agent and lattle if applicable.	(NOTE: Registered Agent signature required when reinstating)		DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM CULLIFER, RICHARD H 400 S. US HIGHWAY ONE, SUITE #4 JUPITER, FL 33477		
NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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	Certify that the information sympling with this filling close not qualify for the e		

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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 preceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

/16/07

Daytime Phone #