


2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90028 040 ****50.00

DOCUMENT # L03000004448 1. Entity Name COLLEGE & 220 REAL ESTATE, L.L.C.	
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Principal Place of Business 9320 EAST CENTRAL WICHITA, KS 67206	Mailing Address 9320 EAST CENTRAL WICHITA, KS 67206
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20050061



04262005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 33-1044916	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent MCFALL, KEVIN 2285 MARSHA HAWK LANE #16110 ORANGE PARK, FL 32003

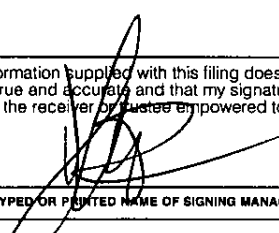
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>
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Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MCFALL, KEVIN 2285 MARSH HAWK LANE #16110 ORANGE PARK, FL 32003
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LETT, CJ 9320 E CENTRAL WICHITA, KS 67206
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date <u>4/26/05</u> Daytime Phone # <u>316-636-1801</u>
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