2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 02, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000016957

1. Entity Name
KOKOMO, LLC

Principal Place of Business	Mailing Address
5896 SHAWNEE DRIVE LAKE WORTH, FL 33464	5896 SHAWNEE DRIVE LAKE WORTH, FL 33464

DO NOT WRITE IN THIS SPACE

07122006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
10-3160629

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HINDEN, JON A ESQ
4430 SOUTHWEST 64TH AVENUE
DAVIE, FL 33314

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 6, 2006

U00000573151
08/02/06-80004-012 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	PD
NAME	MITCHELL, JOHN C
STREET ADDRESS	LANTANA RD & MILITARY TRAIL
CITY-ST-ZIP	LANTANA, FL
TITLE	STD
NAME	MITCHELL, RUTH D
STREET ADDRESS	LANTANA RD & MILITARY TRAIL
CITY-ST-ZIP	LANTANA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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: John C. Mitchell 7/31/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #