

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026838

Entity Name: KENKOY, LLC

FILED  
Apr 28, 2008  
Secretary of State

## Current Principal Place of Business:

140 TONINA COVE  
SUITE 100  
MAITLAND, FL 32751

## New Principal Place of Business:

## Current Mailing Address:

140 TONINA COVE  
MAITLAND, FL 32751

## New Mailing Address:

FEI Number: 20-0108179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LLULL, ANTONIA  
2609 ILLINOIS ST.  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

LLULL, ANTONIA  
420 BRIDLE PATH  
CASSELBERRY, FL 32707 US

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.

SIGNATURE: ANTONIA LLULL

04/28/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LLULL, ANTONIA  
Address: 2609 ILLINOIS ST.  
City-St-Zip: ORLANDO, FL 32803

Title: MGRM ( ) Delete  
Name: LLULL, CARMEN  
Address: 420 BRIDLE PATH  
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM ( ) Delete  
Name: LLULL, JOSE  
Address: 420 BRIDLE PATH  
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM ( ) Delete  
Name: BOUFFARD, JOSE ANTONIO  
Address: 1936 SHERWOOD GLEN  
City-St-Zip: BLOOMFIELD HILLS, MI 48302

Title: MGRM ( ) Delete  
Name: BARACEROS, FIDELINA N  
Address: 1936 SHERWOOD GLEN  
City-St-Zip: BLOOMFIELD HILLS, MI 48307

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LLULL, ANTONIA  
Address: 420 BRIDLE PATH  
City-St-Zip: CASSELBERRY, FL 32707

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOSE LLULL

MGRM

04/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date