

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

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FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90041 017 ****50.00

DOCUMENT # L03000048660

1. Entity Name

KENNEDY VENTURES, LLC



Principal Place of Business

**1704 W KENNEDY BLVD.
TAMPA FL 33606**

Mailing Address

**1704 W KENNEDY BLVD.
TAMPA FL 33606**

2. Principal Place of Business
5607 Johns Rd.

3. Mailing Address
5607 Johns Rd.

Suite, Apt. #, etc.
Suite 1001

Suite, Apt. #, etc.
Suite 1001

City & State
Tampa, FL

City & State
Tampa, FL

Zip
33634

Country
Hillsborough

Zip
33634

Country
Hillsborough



1st MOORE

CR2E083 (10/04)

4. FEI Number

80-0084964

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ITALIANO, ANTHONY S SR
1704 W KENNEDY BLVD.
TAMPA FL 33606-1649**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Anthony S. Italiano

ANTHONY S. ITALIANO SR. MGR./CHAIRMAN. 4/8/05

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRC
ITALIANO, ANTHONY S SR
1704 W KENNEDY BLVD.
TAMPA FL 33606-1649** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRP-
ITALIANO, SALVATORE A
1704 W KENNEDY BLVD.
TAMPA FL 33606-1649** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRC
ITALIANO, ANTHONY S SR
5607 JOHNS RD. - SUITE 1001
TAMPA, FL 33634** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRP
ITALIANO, SALVATORE A
5607 JOHNS RD. - SUITE 1001
TAMPA, FL 33634** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Anthony S. Italiano
ANTHONY S. ITALIANO SR.

MGR & CHRMN.

4/8/05

(813) 254-3883

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

Date

Daytime Phone #