2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED Apr 30, 2007 08:00 All Secretary of State DOCUMENT # L03000051516 1. Enlity Name ROBERT KERR, LLC Principal Place of Business Mailing Address 12211 CHIPPENHAM CT 12211 CHIPPENHAM CT JACKSONVILLE FL 32225 JACKSONVILLE FL 32225 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #, etc. Suite. Apt. #, etc. 1st MOORE CR2E083 (10/06) City & State City & Stato 4. FEI Number Applied For 20-0459798 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo FORDHAM, SCOTT B Street Address (P.O. Box Number is Not Acceptable) 1241 S MCDUFF AVE JACKSONVILLE FL 32205 Zip Code City 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, typed or printed name of registered agent and title 4 applicable (NOTE: Registered Agent signature required when registating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. IIIII. ☐ Delete TITLE Change Addition MGRM NAME KERR, ROBERT J JR NAME STREET ADDRESS STREET ADDRESS 12211 CHIPPENHAM CT CITY-SI-7tP CHY-ST-ZIP JACKSONVILLE FL 32225 ☐ Addition ☐ Change ШП Defete Ш NAME NAME STREET ADORESS STREET ADDRESS CHY-S1-7IP CITY-ST-7/P Change ☐ Addition 1000 Defete THE NAME NAME STREET ADDRESS STREET ADDRESS CDY-ST-7IF CITY-ST-7IP U00000744261 □ Change ☐ Addition 1005 ☐ Delete TITLE NAME NAME 05/15/07-80141-024 50.00 STREET AODRESS STREET ADDRESS CHY-SI-7IP CHY-S1-ZIF Addition ☐ Delete Change IIIII. NAME NAME STREET AODRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZP THLE Change Addition ☐ Delete THILL NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIE 11. I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath; that I am a managing member or manager of the limited tiability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Robert J. Kerr 54/28

Daytime Phone #