

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-13-2007 90035 030 \*\*\*\*50.00

**DOCUMENT # L03000055939**

1. Entity Name  
ALKAY HOLDINGS, L.C.



Principal Place of Business  
3585 B QUAIL MEADOW TRAIL  
PALM CITY, FL 34990

Mailing Address  
3585 B QUAIL MEADOW TRAIL  
PALM CITY, FL 34990

30006160



03192007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0724553

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

KRESER, LOUIS J  
3585 B QUAIL MEADOW TRAIL  
PALM CITY, FL 34990

**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

*[Signature]*

(Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

4/3/07  
DATE

Filing Fee is \$50.00  
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	KRESER, LOUIS J
STREET ADDRESS	3585 B QUAIL MEADOW TRAIL
CITY - ST - ZIP	PALM CITY, FL 34990
TITLE	MGR
NAME	KRESER, PENELOPE S
STREET ADDRESS	3585 B QUAIL MEADOW TRAIL
CITY - ST - ZIP	PALM CITY, FL 34990
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:

*[Signature]*

(Typed or printed name of signing managing member, or authorized representative)

4/25/07  
Date

Daytime Phone #