


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**May 12, 2005 8:00 am
Secretary of State**

04-20-2005 90028 005 ****50.00

DOCUMENT # L03000056947 1. Entity Name KENNY SMITH LLC	
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Principal Place of Business 124 COLONIAL DRIVE AUBURDALE, FL 33823 US	Mailing Address 124 COLONIAL DRIVE AUBURDALE, FL 33823 US
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04092005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 16-1697276	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent SMITH, KENNY E 124 COLONIAL DRIVE AUBURDALE, FL 33823

**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 reappointing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, KENNY E 124 COLONIAL DRIVE AUBURDALE, FL 33823
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**DO NOT WRITE
IN THIS SPACE**

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: X Kenny Smith LLC 4/12/05 (863) 968-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #