## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000056947

US

**KENNY SMITH LLC** 



FILED Apr 19, 2007 08:00 A Secretary of State

Principal Place of Business

124 COLONIAL DRIVE AUBURNDALE, FL 33823 Mailing Address

124 COLONIAL DRIVE AUBURNDALE, FL 33823

US



04142007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

	 	,
4. FEI Number	L	Applied For
<u>16-1697276</u>		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SMITH, KENNY E 124 COLONIAL DRIVE

## DO NOT WRITE

AUBURNDALE, FL 33823		IN THIS SI	IN THIS SPACE			
	named entity submits this statement for the purpose of changing it ions of registered agent.	s registered office or registered agent, or both, in the State of F	Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable (NC	TE: Registered Agent signature required when reinstating)	DATE			
Fi D	iling Fee is \$50.00 ue by May 1, 2007					
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, KENNY E 124 COLONIAL DRIVE AUBURNDALE, FL 33823					
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR SMITH, ROBERT E 124 COLONIAL DR AUBURNDALE, FL 33823					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT V	VRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	PACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U80 04 /29 /	000716023 07-80014-019 50.00			
TITLE NAME STREET ADDRESS	· :	U47.207	Ollocottalata aprop			

11. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE