

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000027063

Entity Name: KIRBY LOOP LLC

FILED  
Mar 03, 2005  
Secretary of State

## Current Principal Place of Business:

2731 N.E. 14TH STREET  
POMPANO BEACH, FL 33062 US

## New Principal Place of Business:

199 W. PALMETTO PARK ROAD  
SUITE 5A  
BOCA RATON, FL 33432 US

## Current Mailing Address:

2731 N.E. 14TH STREET  
POMPANO BEACH, FL 33062 US

## New Mailing Address:

199 W. PALMETTO PARK ROAD  
BOCA RATON, FL 33432 US

FEI Number: 83-0391543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAMMERSLA, ROBERT M  
2731 N.E. 14TH. STREET  
POMPANO BEACH, FL 33062 US

## Name and Address of New Registered Agent:

HAMMERSLA, ROBERT M  
2731 N.E. 14TH. STREET  
APT 138B  
POMPANO BEACH, FL 33062 US

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.

SIGNATURE: ROBERT M HAMMERSLA

03/03/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: DIEHLE, JOHN  
Address: 199 W. PALMETTO PARK ROAD, SUITE 5A  
City-St-Zip: BOCA RATON, FL 33432 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DIEHL, JOHN  
Address: 199 W. PALMETTO PARK ROAD, SUITE 5A  
City-St-Zip: BOCA RATON, FL 33432 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JOHN DIEHL

MGR

03/03/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date