

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 22, 2007 08:00 AM  
Secretary of State**

**DOCUMENT #L04000030182**

1. Entity Name  
**KILLILEA PROPERTIES LLC**



Principal Place of Business  
**13800 SW 16TH ST  
DAVIE, FL 33325**

Mailing Address  
**13800 SW 16TH ST  
DAVIE, FL 33325**



01062007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>01-0812289</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**KILLILEA, KEVIN M  
13800 SW 16TH ST  
DAVIE, FL 33325**

**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)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM KILLILEA, KEVIN M 13800 SW 16TH ST DAVIE, FL 33325</b>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM KILLILEA, ELIZABETH G 13800 SW 16TH ST DAVIE, FL 33325</b>
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01/22/07-80071-003 50.00

**DO NOT WRITE  
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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 606, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**18 Jan 2007 954 693 3515**

Date

Daytime Phone #

**Kevin M Killilea**