## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

## Mar 06, 2006 8:00 am Secretary of State **DOCUMENT # L04000032970** 02-15-2006 90135 006 \*\*\*\*50.00 LADY KATHRYN, LLC Principal Place of Business Mailing Address 101 SANSURY'S WAY 101 SANSURY'S WAY WEST PALM BEACH, FL 33411 WEST PALM BEACH, FL 33411 CR2E083 (11/05) 01262006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent DEFREHN, JOHN A DO NOT WRITE 8645 PINE CAY WEST PALM BEACH, FL 33411 IN THIS SPACE 6. 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. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGRM MILE VECELLIO GROUP, INC NAME 101 SANSBURY'S WAY STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33411 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TOLE -IN THIS SPACE STREET ADORESS CITY-ST-ZP TILE STREET ADDRESS (217-51-2**9** TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 peepver or trustee simpowered to execute this report as required by Chapter 608, Florida Statutes.

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**FILED** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 17, 2006

LADY KATHRYN, LLC 101 SANSURY"S WAY WEST PALM BEACH, FL 33411

Subject: LADY KATHRYN, LLC

Reference Number:

L04000032970

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/MH ANNUAL REPORTS SECTION

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