

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90045 001 ****50.00

DOCUMENT # L04000045876

1. Entity Name
FLEMING KOZAK PROPERTIES, LLC



Principal Place of Business
406 LIGHTHOUSE WAY
SANIBEL ISLAND, FL 33975

Mailing Address
PO BOX 338
SPRING HILL, TN 37174

2. Principal Place of Business
11620 Court of Palms

3. Mailing Address

Suite, Apt. #, etc.
101

Suite, Apt. #, etc.

City & State
Fort Myers, FL

City & State

Zip
33908

Country

Zip

Country

03232006 Shg-LLC

CR2E083 (11/05)

4. FEI Number
84-1650562

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FLEMING, JERRY W
406 LIGHTHOUSE WAY
SANIBEL ISLAND, FL 33975

7. Name and Address of New Registered Agent

Name
Fleming, Jerry W.
Street Address (P.O. Box Number is Not Acceptable)
11620 Court of Palms #101
City
Fort Myers FL Zip Code
33908

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 fee if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
KOZAK, RANDALL
PO BOX 338
SPRING HILL, TN 37174 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
FLEMING, JERRY
406 LIGHTHOUSE WAY
SANIBEL ISLAND, FL 33975 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
Fleming, Jerry
11620 Court of Palms #101
Fort Myers, FL 33908 ☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP
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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 608, Florida Statutes.

SIGNATURE: Randall Kozak MGRM Randall Kozak

3/23/06

931-486-2296

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

Date

Daytime Phone #