

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046641

Entity Name: KOHN VENTURES, LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

2020 WEST BRANDON BLVD, STE 140
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

2020 WEST BRANDON BLVD, STE 140
BRANDON, FL 33511

New Mailing Address:

FEI Number: 76-0800639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ANDERSON, GAVIN
2020 WEST BRANDON BLVD, STE 140
BRANDON, FL 33511 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JURGENSMEYER, BRYAN
Address: 2020 WEST BRANDON BLVD, STE 140
City-St-Zip: BRANDON, FL 33511

Title: MGR () Delete
Name: ANDERSON, GAVIN
Address: 2020 WEST BRANDON BLVD, STE 140
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ANDERSON, SKYLAR
Address: 2020 WEST BRANDON BLVD, STE 140
City-St-Zip: BRANDON, FL 33511

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GAVIN ANDERSON

MGR

05/01/2006

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