

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000046972

1. Entity Name
K.M.V. PROPERTIES, LLC



Principal Place of Business
660 LAS PALMAS DRIVE
BOYNTON BEACH, FL 33435

Mailing Address
660 LAS PALMAS DRIVE
BOYNTON BEACH, FL 33435



01262007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1283945

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

VICKERY, KASEE M
660 LAS PALMAS DRIVE
BOYNTON BEACH, FL 33435

**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

0000000000051
01/30/07-80063-006 150.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
VICKERY, KASEE M
660 LAS PALMAS DRIVE
BOYNTON BEACH, FL 33435

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: _____

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

JAN 23 2007

Date

Daytime Phone # _____