

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050857

Entity Name: KOALA-T GIFTS, LLC.

FILED
Apr 08, 2005
Secretary of State

Current Principal Place of Business:

1010 NORTH HOAGLAND BLVD.
KISSIMMEE, FL 34741

New Principal Place of Business:

17 WEST MONUMENT AVENUE
KISSIMMEE, FL 34741

Current Mailing Address:

P. O. BOX 452144
KISSIMMEE, FL 347452144

New Mailing Address:

P. O. BOX 451443
KISSIMMEE, FL 347451443

FEI Number: 20-1343817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, SCOTT P
1010 NORTH HOAGLAND BLVD.
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

LONG, SCOTT P
17 WEST MONUMENT AVENUE
KISSIMMEE, FL 34741 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: SCOTT P LONG

04/08/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LONG, SCOTT P
Address: 2391 THE OAKS BLVD.
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM () Delete
Name: LONG, JEANETTE R
Address: 2391 THE OAKS BLVD.
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES:

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

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 Section 119.07(3)(i), 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: SCOTT P LONG

MGRM

04/08/2005

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