2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# L04000053368

Entity Name: KANEHLE, LLC

Current Principal Place of Business:

3120 CRYSTAL CREEK BLVD
ORLANDO, FL 32837

New Principal Place of Business:

110 EAST PINE STREET
DAVENPORT, FL 33837 US

Current Mailing Address:

3120 CRYSTAL CREEK BLVD
ORLANDO, FL 32837

New Mailing Address:

PO BOX 2014
DAVENPORT, FL 33836 US

FEI Number: 51-0515388 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EHLE, CHERYL D
3120 CRYSTAL CREEK BLVD
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

EHLE, CHERYL D
110 EAST PINE STREET
DAVENPORT, FL 33837 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: CHERYL D. EHLE 04/27/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KANE, JOHN J
Address: 3120 CRYSTAL CREEK BLVD
City-St-Zip: ORLANDO, FL 32837

Title: MGR ( ) Delete
Name: EHLE, CHERYL D
Address: 3120 CRYSTAL CREEK BLVD
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KANE, JOHN J
Address: 110 EAST PINE STREET
City-St-Zip: DAVENPORT, FL 33837

Title: MGR (X) Change ( ) Addition
Name: EHLE, CHERYL D
Address: 110 EAST PINE STREET
City-St-Zip: DAVENPORT, FL 33837

I hereby certify that the information supplied with this filing does not qualify 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: CHERYL D. EHLE MGR 04/27/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date