

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000056895

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** KING 205, L.L.C.

**Current Principal Place of Business:**

205 WEST KING STREET  
UNIT D  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

205 WEST KING STREET  
UNIT A  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

205 WEST KING ST  
UNIT B  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

**FEI Number:** 41-2148259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FERRELL, DOUGLAS A  
205 WEST KING STREET  
UNIT B  
ST. AUGUSTINE, FL 32084 US

**Name and Address of New Registered Agent:**

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: MGRM  
Name: FERRELL, DOUGLAS A  
Address: 4245 WICKS BRANCH RD  
City-St-Zip: SAINT AUGUSTINE, FL 32086

I hereby 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: DOUGLAS A FERRELL

MGRM

04/28/2011

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