2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000057267

1. Entity Name

KRL INVESTMENTS, LLC



Principal Place of Business

795 SAN CHRISTOPHER DRIVE DUNEDIN, FL 34698

Mailing Address

795 SAN CHRISTOPHER DRIVE DUNEDIN, FL 34698

FILED Jan 11, 2007 8:00 am Secretary of State

01-11-2007 90132 042 ****50.00



DO NOT WRITE IN THIS SPACE

01052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1453042

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GRACY, G. ANDREW ESQ PEEBLES & GRACY, P.A. 826 BROADWAY DUNEDIN, FL. 34698

DO NOT WRITE IN THIS SPACE

The above named entity submits this state	ement 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

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BADDERS, GARY L 795 SAN CHRISTOPHER DRIVE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BADDERS, LORI A 795 SAN CHRISTOPHER DRIVE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby	certify that the information supplied with this filling does not qualify for the ex

DO NOT WRITE 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

Jou Ci

Dodler

LORI A BADDERS

1-5-07

727 733-0466

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

Date

Daytime Phone #