

LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90023 004 ****50.00

DOCUMENT # L04000068589

1. Entity Name
KENNEDY VILLAGE, LLC



Principal Place of Business
**7390 FAIRWAY TRAIL
BOCA RATON, FL 33487 US**

Mailing Address
**7390 FAIRWAY TRAIL
BOCA RATON, FL 33487 US**

20032817



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02112005 Chg-LLC CR2E083 (10/03)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**BROWN, ELIZABETH M
3094 JOG ROAD
GREENACRES, FL 33467**

7. Name and Address of New Registered Agent

Name **Tome, Linda**
Street Address (P.O. Box Number is Not Acceptable)
7390 Fairway Trail

City **Boca Raton** FL Zip Code **33487**

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

Linda Tome

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/3/06

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
TOME, WILLIAM
7390 FAIRWAY TRAIL
BOCA RATON, FL 33487** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
TOME, LINDA B
7390 FAIRWAY TRAIL
BOCA RATON, FL 33487** ☐ Delete

TITLE
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STREET ADDRESS
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☐ Change ☐ Addition

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11. I hereby certify that the information supplied with this filing does not qualify 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 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:

Linda Tome

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

4/3/06

Date

Daytime Phone #