### 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

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#### Apr 26, 2005 8:00 am Secretary of State **DOCUMENT # L04000070024** 04-26-2005 90018 003 \*\*\*\*50.00 1. Entity Name KEITH HOPKINS, LLC Principal Place of Business Mailing Address 1848 JUNO ISLES BLVD. 1848 JUNO ISLES BLVD. 20047698 NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04192005 Chg-LLC CR2E083 (10/03) City & State City & State Applied For Not Applicable Zip Country Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOPKINS, KEITH 1848 JUNO ISLES BLVD. Street Address (P.O. Box Number is Not Acceptable) NORTH PALM BEACH, FL 33408 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME HOPKINS, KEITH NAME STREET ADDRESS 1848 JUNO ISLES BLVD. STREET ADDRESS NORTH PALM BEACH, FL 33408 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 received or trustee employered to execute this report as required by Chapter 608, Florida Statutes.

IG MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**FILED** 

# ATTACHMENT 20047698



## **Division of Corporations**

## 2005 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.

Document Number

L04000070024

**Business Entity Name** 

KEITH HOPKINS, LLC

Original File Date

09/25/2004

FEI Number

Principal Address 1848 JUNO ISLES BLVD.

NORTH PALM BEACH, FL 33408

Mailing Address

1848 JUNO ISLES BLVD.

NORTH PALM BEACH, FL 33408

Registered Agent

KEITH HOPKINS

1848 JUNO ISLES BLVD.

NORTH PALM BEACH, FL 33408 US

Managing Member/Manager Name And Address

**MGR** 

KEITH HOPKINS

1848 JUNO ISLES BLVD.

NORTH PALM BEACH, FL 33408

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