

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078626

FILED
Mar 10, 2009
Secretary of State

Entity Name: KEEPERS ONLY FISHING RESORT, LLC

Current Principal Place of Business:

40 CRAWFORD DR
LAKE PLACID, 33 33852

New Principal Place of Business:

Current Mailing Address:

5089 PLACID VIEW DR.
LAKE PLACID, 33 33852

New Mailing Address:

FEI Number: 20-1871516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, NANCY E
5089 PLACID VIEW DR.
LAKE PLACID, FL 33852 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 () Delete
Name: FORD, DAVID A
Address: 5089 PLACID VIEW DR.
City-St-Zip: LAKE PLACID, FL 33852

Title: MGRM () Delete
Name: FORD, NANCY E
Address: 5089 PLACID VIEW DR.
City-St-Zip: LAKE PLACID, 33 33852

Title: MGRM () Delete
Name: LAYTON, STEVEN E
Address: 40 CRAWFORD DR.
City-St-Zip: LAKE PLACID, FL 33852

Title: MGRM () Delete
Name: LAYTON, ELIZABTH D
Address: 40 CRAWFORD DR.
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NANCY E FORD

MGRM

03/10/2009

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