

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078762

FILED
Aug 12, 2007
Secretary of State

Entity Name: CYNTHIA KAYE, LLC

Current Principal Place of Business:

2911 FOGARTY AVE
KEY WEST, FL 33040

New Principal Place of Business:

1061 SUGARLOAF BLVD
SUGARLOAF KEY, FL 33042

Current Mailing Address:

P.O. BOX 510195
KEY COLONY BEACH, FL 33051

New Mailing Address:

1061 SUGARLOAF BLVD
SUGARLOAF KEY, FL 33042

FEI Number: 20-5692551 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KAYE, CYNTHIA
2911 FOGARTY AVE
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

KAYE, CYNTHIA
1061 SUGARLOAF BLVD
SUGARLOAF KEY, FL 33042 US

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: _____

08/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KAYE, CYNTHIA
Address: 2911 FOGARTY AVE
City-St-Zip: KEY WEST, FL 33040

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: LEWIS, JONATHAN S
Address: 1061 SUGARLOAF BLVD
City-St-Zip: SUGARLOAF KEY, FL 33042

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: CYNTHIA KAYE

MGR

08/12/2007

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