

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000255

Entity Name: ORMOND PARTNERS LLC

FILED  
Jan 09, 2007  
Secretary of State

## Current Principal Place of Business:

3257 VALLEY ROAD  
ATLANTA, GA 303051152 US

## Current Mailing Address:

3257 VALLEY ROAD  
ATLANTA, GA 303051152 US

## New Principal Place of Business:

300 S CENTRAL AVE  
SUITE 105  
FLAGLER BEACH, FL 32136 US

## New Mailing Address:

55 OLD POWERS PLACE  
ATLANTA, GA 303274212 US

FEI Number: 20-2107497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HORAN, JOHN W  
1531 NORTH FEDERAL HIGHWAY  
LAKE WORTH, FL 33460 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: KELLY, WIN  
Address: 6857 SEA COVE AVE EAST  
City-St-Zip: ST. AUGUSTINE, FL 320867974 US

Title: MGRM ( ) Delete  
Name: HORAN, JOHN W  
Address: 1531 N FEDERAL HIGHWAY  
City-St-Zip: LAKE WORTH, FL 334601964 US

Title: MGRM ( ) Delete  
Name: KENNELLY, ROBERT C  
Address: 3257 VALLEY ROAD  
City-St-Zip: ATLANTA, GA 303051152 US

Title: MGRM ( ) Delete  
Name: BRAREN, MICHAEL  
Address: 500 S SEA LAKE LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 320824752 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: KELLY, WIN  
Address: 6899 A1A SOUTH  
City-St-Zip: ST. AUGUSTINE, FL 32080 US

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

Title: MGRM (X) Change ( ) Addition  
Name: KENNELLY, ROBERT C  
Address: 55 OLD POWERS PLACE  
City-St-Zip: ATLANTA, GA 303274212 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT KENNELLY

MR.

01/09/2007

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