

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003868

Entity Name: KADIMA OF S.W.FL, LLC.

FILED
Jan 13, 2008
Secretary of State

Current Principal Place of Business:

2431 LASALLE AVE
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

2431 LASALLE AVE
FORT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 20-2018261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERITAGE TAX & CONSULTING SERVICES INC
11220 METRO PARKWAY
3
FORT MYERS, FL 33912 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: FARRON, MARC
Address: 2431 LASALLE AVE
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGR () Delete
Name: FARRON, JUDY
Address: 2431 LASALLE AVE
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGR () Delete
Name: BAUSI, JULIANA
Address: 2431 LASALLE AVE
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGR () Delete
Name: FARRON, ADAM
Address: 2431 LASALLE AVE
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGR () Delete
Name: FARRON, YESHAYA
Address: 2431 LASALLE AVE
City-St-Zip: FORT MYERS, FL 33907 US

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:

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: MARC FARRON

MGRM

01/13/2008

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