



**FILED**  
**Mar 14, 2006 8:00 am**  
**Secretary of State**

03-14-2006 90199 004 \*\*\*\*50.00

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

<b>DOCUMENT # L05000008091</b> 1. Entity Name OLD KINGS PARTNERS, LLC					
Principal Place of Business 411 SOUTH CENTRAL AVENUE FLAGLER BEACH, FL 32136				Mailing Address 411 SOUTH CENTRAL AVENUE FLAGLER BEACH, FL 32136	
2. Principal Place of Business 301 S. Central Ave		3. Mailing Address 301 S. Central Ave			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01122006 Chg-LLC CR2E083 (11/05)	
City & State Flagler Beach, FL		City & State Flagler Beach, FL		4. FEI Number 16-1718027	
Zip 32136		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent SMITH, RICH 411 SOUTH CENTRAL AVENUE FLAGLER BEACH, FL 32136	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 301 S. Central Ave City Flagler Beach FL Zip Code 32136				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 <u>Rich Smith</u> DATE <u>3-1-06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$50.00 Due by May 1, 2006				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE MGR NAME LIGHTHOUSE DEVELOPMENT GROUP, INC. STREET ADDRESS 411 SOUTH CENTRAL AVENUE CITY-ST-ZIP FLAGLER BEACH, FL 32136				TITLE NAME 301 S. Central Ave STREET ADDRESS CITY-ST-ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Rich Smith</u> DATE <u>3-1-06</u> DAYTIME PHONE # <u>386-439-3011</u> <small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					