

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000020209

**FILED**  
**Apr 29, 2006**  
**Secretary of State**

**Entity Name:** JUSTIN KAY, LLC

**Current Principal Place of Business:**

2184 BELAIRE DRIVE  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

4335 THOMAS WOOD LANE EAST  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

P.O. BOX 1167  
EAGLE LAKE, FL 33839

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARPENTER, CHRISTA S  
2185 BELAIRE DRIVE  
WINTER HAVEN, FL 33880 US

**Name and Address of New Registered Agent:**

CARPENTER, CHRISTA S  
4335 THOMAS WOOD LANE EAST  
WINTER HAVEN, FL 33880 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: C. SKYE CARPENTER

04/29/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: KAY, JUSTIN C  
Address: P.O. BOX 1167  
City-St-Zip: EAGLE LAKE, FL 33839

**ADDITIONS/CHANGES:**

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: JUSTIN C. KAY

MGR

04/29/2006

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