


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000026247 1. Entity Name KIMBERLY G. ROBINSON, L.L.C.	
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Principal Place of Business 213 FLAME AVENUE MAITLAND, FL 32751	Mailing Address 213 FLAME AVENUE MAITLAND, FL 32751
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DO NOT WRITE IN THIS SPACE



04022008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2619737	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent RUBINO, NICHOLAS J ESQ RUBINO & ASSOCIATES, P.L.C. 159 LOOKOUT PLACE, SUITE 101 MAITLAND, FL 32751-4466

**DO NOT WRITE
IN THIS SPACE**

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: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

UN00000895234
04/24/08-80060-010 138.75

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROBINSON, KIMBERLY G 213 FLAME AVENUE MAITLAND, FL 32751
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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: Kimberly G. Robinson 4-9-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #