

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000071817**

1. Entity Name  
**LOVE STREET PROPERTIES, LLC**



Principal Place of Business

**65 HICKORY HILL ROAD  
TEQUESTA, FL 33469**

Mailing Address

**65 HICKORY HILL ROAD  
TEQUESTA, FL 33469**

**DO NOT WRITE IN THIS SPACE**



01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**KOZINSKI, KATHLEEN G  
1061 E. INDIANTOWN ROAD  
SUITE 416  
JUPITER, FL 33477**

**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)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	RUTECKI, CAROLYN
STREET ADDRESS	65 HICKORY HILL ROAD
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	MGRM
NAME	RUTECKI, DAVID
STREET ADDRESS	65 HICKORY HILL ROAD
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000809052  
02/08/08-80007-012 138.75

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/23/08

Date

861-741-0154

Daytime Phone #