2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000094756

1. Entity Name

K & L INVESTMENT PROPERTY, LLC



Principal Place of Business

Mailing Address

449 WHISPERING OAK LANE APOPKA, FL 32712 US 449 WHISPERING OAK LANE APOPKA, FL 32712 US

FILED Apr 25, 2007 8:00 am Secretary of State

04-25-2007 90042 010 ****50.00

TEDDE AND



04182007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-3528994		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

WNKELSAS, TIFFANY A 1601 JACKSON STREET SUITE 201 FORT MYERS, FL 33901 DO NOT WRITE IN THIS SPACE

			*
	named entity submits this statement for the purpose of charions of registered agent.	nging its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accep
SIGNATURE.	Signature. Niped or printed name of registered agent and title if applicable.	(NOTE, Registered Agent rignishure required when remistating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRYAN-WINKELSAS, KEELY 449 WHISPERING OAK LANE APOPKA, FL 32712		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Do	NOT WRITE THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS			

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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Keely Bryan Winkelsas

4/18/07

407 886 9209 Dayorne Phone #