

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

04-19-2006 90020 019 ****50.00

DOCUMENT # L05000095894

1. Entity Name
LEISURE 4 INVESTMENTS, LLC



Principal Place of Business
**203 HICKORY DRIVE
LONGWOOD, FL 32779**

Mailing Address
**203 HICKORY DRIVE
LONGWOOD, FL 32779**

30007101



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04132006 Chg-LLC --CR2E083 (11/05)

City & State

City & State

4. FEI Number
20-3584950

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KOLTUN, JEFFREY M
557 NORTH WYMORE ROAD
SUITE 100
MAITLAND, FL 32751**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 remitting)

DATE

**Filing Fee is \$50.00
Due by May 1, 2008**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING member
SMITH, DARRELL
203 HICKORY DRIVE
LONGWOOD, FL 32779** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING member
SMITH, KIM
203 HICKORY DRIVE
LONGWOOD, FL 32779** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING member
AGUIRRE, RALPH JR.
3338 LUKAS COVE
ORLANDO, FL 32820** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AGUIRRE, RALPH JR.
205 BROMBONES LANE
LONGWOOD, FL 32750** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING member
AGUIRRE, MAIDA
3338 LUKAS COVE
ORLANDO, FL 32820** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AGUIRRE, MAIDA
205 BROMBONES LANE
LONGWOOD, FL 32750** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Kim Smith

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

4/18/06

Date

407-861-5776

Daytime Phone #

ATTACHMENT
30007101

4/30/06

Re: LLC renewal info. for Leisure 4 Investments, LLC.
Reference Number: L05000095894

203 Hickory Drive
Longwood, Fl. 32779

Dear Sirs,

As per your request, the titles of each individual have been listed on the annual report.
All partners are managing partners.

Thank you,

Kim Smith