

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000112337

Entity Name: KERED CONNORS, LLC

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

625 EAST TWIGGS STREET, SUITE 100
TAMPA, FL 33602

New Principal Place of Business:

1801 NORTH HIGHLAND AVENUE
ATTN: JONATHAN C. KOCH
TAMPA, FL 33602

Current Mailing Address:

625 EAST TWIGGS STREET, SUITE 100
TAMPA, FL 33602

New Mailing Address:

1801 NORTH HIGHLAND AVENUE
ATTN: JONATHAN C. KOCH
TAMPA, FL 33602

FEI Number: 01-0850172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES LLC
1801 NORTH HIGHLAND AVENUE
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POKORNY, JAMES R MANAGER
Address: 8401 CHAGRIN ROAD
City-St-Zip: CHAGRIN FALLS, OH 44023 US

Title: MGRM () Delete
Name: JETR, CHARLES
Address: 550 N RED STREET STE 300
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: JETER, CHARLES
Address: 550 N RED STREET STE 300
City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES JETER

MGRM

01/26/2009

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