## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L05000117148**

1. Entity Name

KENSINGTON SOUTH 806, LLC



**FILED** Jan 07, 2008 08:00 AM **Secretary of State** 

Principal Place of Business

7013 NE 74TH STREET GAINESVILLE, FL 32609 Mailing Address

7013 NE 74TH STREET GAINESVILLE, FL 32609

US



01042008 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

MOULTON, CLAUDE R 2014 N LAURA ST JACKSONVILLE, FL 32206

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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

U00000775418 01/08/08-80029-011 138.75

9. MANAGING MEMBERS/MANAGERS		[[編][[[[]]][[]][[]][[]][[]][[]][[]][[]]
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YOUNG, ELAINE 7013 NE 74TH STREET GAINESVILLE, FL 32609	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-2IP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		emptions contained in Chapter 119, Florida Statutes. I further certify that the information

I nereoy certify that the mormation supplied with this filing does not quality 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 trustage empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TIPED OR PRINTED NAME O

MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #