

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122210

Entity Name: KAVON PROPERTIES LLC

FILED  
Feb 24, 2009  
Secretary of State

## Current Principal Place of Business:

5331 COGUINA SHORES LN  
PORT ORANGE, FL 32128 US

## New Principal Place of Business:

5331 COQUINA SHORES LN  
PORT ORANGE, FL 32128 US

## Current Mailing Address:

5331 COGUINA SHORES LN  
PORT ORANGE, FL 32128 US

## New Mailing Address:

5331 COQUINA SHORES LN  
PORT ORANGE, FL 32128 US

FEI Number: 71-0993968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NOVAK, PEGGY M  
5331 COGUINA SHORES LN  
PORT ORANGE, FL 32128 US

## Name and Address of New Registered Agent:

NOVAK, PEGGY M  
5331 COQUINA SHORES LN  
PORT ORANGE, FL 32128 US

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: PEGGY M NOVAK

02/24/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: NOVAK, PEGGY M  
Address: 5331 COGUINA SHORES LN  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: MGRM ( ) Delete  
Name: NOVAK, ALLEN J  
Address: 5331 COGUINA SHORES LN  
City-St-Zip: PORT ORANGE, FL 32128 US

## ADDITIONS/CHANGES:

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

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

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: PEGGY M NOVAK

MGRM

02/24/2009

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