

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000008172

FILED
Apr 27, 2009
Secretary of State

Entity Name: CARLYSLE KINGSTON HOUSE, LLC

Current Principal Place of Business:

8955 FONTANA DEL SOL WAY
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

8955 FONTANA DEL SOL WAY
NAPLES, FL 34109

New Mailing Address:

FEI Number: 75-3210095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWOPE, RICHARD
8955 FONTANA DEL SOL WAY
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

SWOPE, RICHARD L
8955 FONTANA DEL SOL WAY
NAPLES, FL 34109 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: EMILY SWOPE

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FRAZER, JOHN H JR.
Address: 28 HAMPTON LANE
City-St-Zip: CINCINNATI, OH 45208

Title: MGRM () Delete
Name: FULLER, VICTORIA F
Address: 1072 OENOKE RIDGE ROAD
City-St-Zip: NEW CANAAN, CT 06840

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: FRAZER, VICTORIA S
Address: 1072 OENOKE RIDGE ROAD
City-St-Zip: NEW CANAAN, CT 06840

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: EMILY SWOPE

BK

04/27/2009

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