2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #1 06000012262



FILED Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90076 049 ****50.00

1. Entity Name OLD KINGS ROAD VEST, LLC							04-30-2007			
Principal Place	a of Business	e	Mailing Address			1	7 7 7 7	AVT		
	TREE DUNW	OODY ROAD, SUITE I	3-102 6111 PEACHTREE DUN ATLANTA, GA 30328-4		Road, Suite B-1	02				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-LLC	CR2E	83 (12/06)	
City & State			City & State	City & State		4. FEI Number	175020			pplied For ot Applicable
Zip	Country		Zip	Country		5. Certificate	of Status Desired		\$5.00 Ad Fee Require	
	6. Name	and Address of Curi	ent Registered Agent			7. Name and	Address of New Re	gistered .	Agent	
CORPORA	TION SE	RVICE COMPAN	Υ	Name						
1201 HAYS STREET TALLAHASSEE, FL 32301-2525					Street Address (P.O. Box Numbe	er is Not Acceptable)			
								FL	Zip Cod	le
8. The above the obligation	named entity ons of regist	y submits this stateme tered agent.	nt for the purpose of changing its	registere	ed office or register	ed agent, or bot	h, in the State of Flor		familiar with,	and accept
SIGNATURE _	Signature, typed	or printed name of registered a	agent and title if applicable. (NOTE	Registere	1 Agent signature required	(when reinstating)	·	DATE		
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Fil Du	ling Fee i ue by May	is \$50.00 y 1, 2007						•	ayable to ent of Stat	te
9.	te by May	y 1, 2007 MANAGING MEI	MBERS/MANAGERS	10.				Departm	ent of Stat	ie
9.	te by May	y 1, 2007 MANAGING MEI	MBERS/MANAGERS	TITLE			Florida	Departm	ent of Stat	Addition
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9. TITLE NAME STREET ADDRESS	Mor- n Stan 1	y 1, 2007 MANAGING MEI	. Delete Hark DOOGLY Rd, Str. 102B 32B	TITLE NAMI STREE	ET ADDRESS ST-ZIP		Florida	Departm	ent of Stat	Addition
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rivereby 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: SIGNATURE NAME OF SIGNATURE AND TYPED OF PRINTED NAME OF SIGN

4127/07

Date

110-391-1993

IG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE