


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L06000025290 1. Entity Name THE KIRCHOFF KIDS, LLC	
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Principal Place of Business 3 JOHN BULOW CIRCLE FLAGLER BEACH, FL 32136	Mailing Address 3 JOHN BULOW CIRCLE FLAGLER BEACH, FL 32136
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DO NOT WRITE IN THIS SPACE



03162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 43-1972632	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent KIRCHOFF, CHRISTOPHER R 3 JOHN BULOW CIRCLE FLAGLER BEACH, FL 32136

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KIRCHOFF, CHRISTOPHER R 3 JOHN BULOW CIRCLE FLAGLER BEACH, FL 32136
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03/29/07-80022-018 55.00

11. I hereby 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: <u>Christopher R. Kirchhoff</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>
<u>3/16/07</u> <small>Date</small>
<u>(301) 706-4505</u> <small>Daytime Phone #</small>