

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000027487

FILED
Apr 26, 2007
Secretary of State

Entity Name: OLD KENTUCKY APT. ASSOCIATES, LLC

Current Principal Place of Business:

10225 ULMERTON ROAD, SUITE 3D
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

10225 ULMERTON ROAD, SUITE 3D
LARGO, FL 33771

New Mailing Address:

FEI Number: 20-4447355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

DUBE, DAVID W
10225 ULMERTON ROAD SUITE 3D
LARGO, FL 33771 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: DAVE DUBE

04/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PEELE, WAYNE B
Address: 10225 ULMERTON ROAD, SUITE 3D
City-St-Zip: LARGO, FL 33771

Title: S () Delete
Name: DUBE, DAVID W
Address: 10225 ULMERTON ROAD, SUITE 3D
City-St-Zip: LARGO, FL 33771

Title: T (X) Delete
Name: DUBE, JACQUELINE M
Address: 10225 ULMERTON ROAD, SUITE 3D
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES:

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

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: WAYNE B PEELE

MGR

04/26/2007

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