2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 29, 2007
Secretary of State

DOCUMENT# L06000090974

Entity Name: KINDRED SPIRIT CREATIONS, L.C.

Current Principal Place of Business:

284 NW 46TH ST.
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

284 NW 46TH ST.
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GATES, ELISABETH
284 NW 46TH ST.
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	GATES, ELISABETH	
Address:	284 NW 46TH ST.	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	MGRM	( ) Delete
Name:	TEPLEY, MADELEINE	
Address:	1797 CRANE CREEK AVE.	
City-St-Zip:	PALM CITY, FL 34990	
Title:	MGRM	( ) Delete
Name:	FARBER, KATHY	
Address:	95 LAURAL RD.	
City-St-Zip:	NEW CITY, NY 10956	

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: ELISABETH E. GATES MGRM 07/29/2007

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