

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104762

Entity Name: KEN'S LLC

FILED
Jul 07, 2008
Secretary of State

Current Principal Place of Business:

2222 49TH ST. S.
ST. PETERSBURG, FL 33707 US

New Principal Place of Business:

Current Mailing Address:

415 HAVEN POINT
TREASURE ISLAND, FL 33706 US

New Mailing Address:

2222 49TH S S
ST PETE, FL 33707 US

FEI Number: 20-8005815 FEI Number Applied For () FEI Number Not Applicable () 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:

HOLLIFIELD, LONNIE K
415 HAVEN POINT
TREASURE ISLAND, FL 33706 US

Name and Address of New Registered Agent:

HOLLIFIELD, LONNIE K
2222 49 ST S
ST. PETE, FL 33707 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: LONNIE HOLLIFIELD

07/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLAUNCH, CHRIS
Address: 12451 POPASH
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: MGRM (X) Delete
Name: HOLLIFIELD, LONNIE K
Address: 415 HAVEN POINT
City-St-Zip: TREASURE ISLAND, FL 33706 US

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: HOLLIFIELD, LONNIE
Address: 2222 49TH S S
City-St-Zip: ST. PETE., FL 33707 US

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: LONNIE HOLLIFIELD

PRES

07/07/2008

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