

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 29, 2008 8:00 am
Secretary of State

01-18-2008 90019 039 ***138.75

DOCUMENT # L06000122246			
1. Entity Name KELLY HOLDINGS, LLC			
Principal Place of Business 1322 SW 12TH AVE. GAINESVILLE, FL 32608		Mailing Address 1322 SW 12TH AVE. GAINESVILLE, FL 32608	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
01172008		Chg-LLC CR2E083 (12/06)	
4. FEI Number 59-1320447		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HINES, JAMES P 315 SOUTH HYDE PARK AVE. TAMPA, FL 33606		7. Name and Address of Now Registered Agent Name Chris P Kelly Street Address (P.O. Box Number is Not Acceptable) 1322 SW 12TH AVE City Gainesville FL Zip Code 32608	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$338.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	W O Jefferson Jr ☐ Delete 147 Cedar Glen Circle Nellys Ford, VA 22958	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 606, Florida Statutes.			
SIGNATURE: Chris P Kelly		21 January 08 3523X6448	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Daytime Phone #	

Managing Member