## 2008 LIMITED LIABILITY COMPANY

## Mar 14, 2008 8:00 am Secretary of State **ANNUAL REPORT** 03-14-2008 90201 032 \*\*\*138.75 DOCUMENT # L07000000713 KENNETH R. JOHNSON, JR., LLC 60014743 Mailing Address Principal Place of Business 1568 COLUSO DRIVE 1568 COLUSO DRIVE WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03082008 Chg-LLC CR2E083 (12/06) 4. FEI Number Applied For City & State City & State 75 3229333 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOHNSON, KENNETH R JR. Street Address (P.O. Box Number is Not Acceptable) 1568 COLUSO DRIVE WINTER GARDEN, FL 34787 City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. -MGRM TITLE Delete TITLE ☐ Change ☐ Addition JOHNSON, KENNETH R JR. NAME NAME STREET ADDRESS 1568 COLUSO DRIVE STREET ADDRESS CITY-SI-ZIP WINTER GARDEN, FL 34787 CITY-ST-ZIP ☐ Addition TITLE ☐ Defete TITLE ☐ Change NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME

**FILED** 

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.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

3-12-08 407-222-5677 Kenneth R. Johnson