

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000061966

Entity Name: KENJENS, LLC

**FILED**  
**Sep 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10400 SW WHOOPING CRANE WAY  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

2250 SW ALMINAR ST  
PORT ST LUCIE, FL 34953 US

**Current Mailing Address:**

PO BOX 2093  
PALM CITY, FL 34990 US

**New Mailing Address:**

FEI Number: 26-0334771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAGIELSKI, KEN  
10400 SW WHOOPING CRANE WAY  
PALM CITY, FL 34990 US

**Name and Address of New Registered Agent:**

MAGIELSKI, KEN  
2250 SW ALMINAR ST  
PORT ST LUCIE, FL 34990 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:

09/21/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MAGIELSKI, KEN  
Address: 2250 SW ALMINAR ST  
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: MGRM  
Name: HARTMAN, JENNIFER  
Address: 2250 SW ALMINAR ST  
City-St-Zip: PORT ST LUCIE, FL 34953 US

I hereby 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: JENNIFER HARTMAN

MGR

09/21/2010

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