

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000077293

FILED
Apr 08, 2009
Secretary of State

Entity Name: KINGDOM INVESTMENTS OF BRANDON LLC

Current Principal Place of Business:

805 NORTH PARSONS AVENUE
BRANDON, FL 33510 US

New Principal Place of Business:

405 VINE KEEPER COURT
SEFFNER, FL 33584 US

Current Mailing Address:

805 NORTH PARSONS AVENUE
BRANDON, FL 33510 US

New Mailing Address:

405 VINE KEEPER COURT
SEFFNER, FL 33584 US

FEI Number: 20-4353154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEU, SCOTT W
805 NORTH PARSONS AVE.
BRANDON, FL 33510 US

Name and Address of New Registered Agent:

LEU, SCOTT W
405 VINE KEEPER COURT
SEFFNER, FL 33584 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:

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEU, SCOTT W
Address: 805 N. PARSONS AVE
City-St-Zip: BRANDON, FL 33510 US

Title: MGRM () Delete
Name: EQUITYTRUSTCUSTODIANFBOMICHAELDGRAVESIRA
Address: 225 BURNS ROAD
City-St-Zip: ELYRIA, OH 44035 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEU, SCOTT W
Address: 405 VINE KEEPER COURT
City-St-Zip: SEFFNER, FL 33584 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: SCOTT W. LEU

MGR

04/08/2009

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