

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000111466

FILED  
Jul 30, 2008  
Secretary of State

Entity Name: ALL KEARNS LLC

**Current Principal Place of Business:**

71 PINE VALLEY COURT  
ROTONDA WEST, FL 33947

**New Principal Place of Business:**

**Current Mailing Address:**

71 PINE VALLEY COURT  
ROTONDA WEST, FL 33947

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

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

KEARNS, DALE  
71 PINE VALLEY COURT  
ROTONDA WEST, FL 33947 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: KEARNS, JOHN B  
Address: 4668 FINLAND AVE  
City-St-Zip: NORTH PORT, FL 34287

Title: MGR ( ) Delete  
Name: KEARNS, JEREMY R  
Address: 12430 MITCHELL TERRACE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: MGR ( ) Delete  
Name: KEARNS, JARED D  
Address: 12430 MITCHELL TERRACE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: MGR ( ) Delete  
Name: KEARNS, TERRY  
Address: 71 PINE VALLEY COURT  
City-St-Zip: ROTONDA WEST, FL 339547

Title: MGRM ( ) Delete  
Name: KEARNS, DALE  
Address: 71 PINE VALLEY COURT  
City-St-Zip: ROTONDA WEST, FL 339547

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DALE KEARNS

PRES

07/30/2008

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