

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000010265

**Entity Name:** KENNETH R. GENTES LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

329 WOODS AVE.  
TAVERNIER, FL 33070 US

**New Principal Place of Business:**

**Current Mailing Address:**

329 WOODS AVE.  
TAVERNIER, FL 33070 US

**New Mailing Address:**

**FEI Number:** 06-1835268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OTTO-FITZDAM, WAYNE A CPA  
19890 SW 272 ST  
HOMESTEAD, FL 33031 US

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

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: MGRM  
Name: GENTES, KENNETH R  
Address: 329 WOODS AVE  
City-St-Zip: TAVERNIER, FL 33070

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: KENNETH R GENTES

MGRM

01/05/2010

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