

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000027085

Entity Name: ALL AMERICAN KAYAK LLC

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5510 N. LAKEWOOD CIRCLE  
#512  
MARGATE, FL 33063

**New Principal Place of Business:**

6945 NW 18TH STREET  
MARGATE, FL 33063

**Current Mailing Address:**

5510 N. LAKEWOOD CIRCLE  
#512  
MARGATE, FL 33063

**New Mailing Address:**

6945 NW 18TH STREET  
MARGATE, FL 33063

FEI Number: 26-2134071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GLEESON, ERICA A  
5510 N. LAKEWOOD CIRCLE  
#512  
MARGATE, FL 33063 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: MGR  
Name: GLEESON, ERICA A  
Address: 6945 NW 18TH STREET  
City-St-Zip: MARGATE, FL 33063

Title: MGR  
Name: MABRY, RACHELLE L  
Address: 6945 NW 18TH STREET  
City-St-Zip: MARGATE, FL 33063

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: ERICA ANN GLEESON

MGR

04/19/2010

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