

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035881

FILED
Jan 19, 2009
Secretary of State

Entity Name: KS & S REAL ESTATE HOLDINGS, L.L.C.

Current Principal Place of Business:

4120 WINDOVER WAY
MELBOURNE, FL 32934

New Principal Place of Business:

Current Mailing Address:

4120 WINDOVER WAY
MELBOURNE, FL 32934

New Mailing Address:

FEI Number: 26-2472142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEC CONSULTANTS, INC.
1515 INDIAN RIVER BLVD., SUITE A 210
VERO BEACH, FL 329607103 US

Name and Address of New Registered Agent:

CHANDRAMANI, KUMAR
4120 WINDOVER WAY
MELBOURNE, FL 32934 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: KUMAR CHANDRAMANI

01/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHANDRAMANI, KUMAR MD
Address: 4120 WINDOVER WAY
City-St-Zip: MELBOURNE, FL 32934

Title: MGRM () Delete
Name: SHAURYA, KAUTLYA
Address: 4120 WINDOVER WAY
City-St-Zip: MELBOURNE, FL 32934

Title: MGRM () Delete
Name: SAHAY, SANGITA M.D.
Address: 4120 WINDOVER WAY
City-St-Zip: MELBOURNE, FL 32934

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:

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: KUMAR CHANDRAMANI

MGRM

01/19/2009

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