

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000054544

Entity Name: KILKENNY - SWIFT LLC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

830 FLEMING STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1075 DUVAL ST. C-21 PMB 156
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 26-2866573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLINS, SHEILA K
830 FLEMING STREET
KEY WEST, FL 33040 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: PT () Delete
Name: MULLINS, JEANNINE
Address: 830 FLEMING STREET
City-St-Zip: KEY WEST, FL 33040

Title: VS () Delete
Name: MULLINS, SHEILA
Address: 830 FLEMING STREET
City-St-Zip: KEY WEST, FL 33040

Title: V () Delete
Name: MULLINS, NICHOLAS J
Address: 830 FLEMING STREET
City-St-Zip: KEY WEST, FL 33040

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: SHIELA MULLINS

P

04/29/2009

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