

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000075161

FILED
May 28, 2009
Secretary of State**Entity Name:** KINNERY RUN LLC**Current Principal Place of Business:**3901 KINNERY RUN
TAMPA, FL 33618 US**New Principal Place of Business:****Current Mailing Address:**3901 KINNERY RUN
TAMPA, FL 33618 US**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SIVYER, NEAL A
401 EAST JACKON STREET
SUITE 2225
TAMPA, FL 33602 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 () Delete
Name: DAVISON, DONNA
Address: 3901 KINNERY RUN
City-St-Zip: TAMPA, FL 33618 USTitle: MGRM () Delete
Name: DAVISON, WILLIAM
Address: 3901 KINNERY RUN
City-St-Zip: TAMPA, FL 33618 USTitle: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP () Change (X) Addition
Name: DAVISON, JOHN A
Address: 15935 WINDING DRIVE
City-St-Zip: TAMPA, FL 33624

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: DONNA DAVISON

MGRM

05/28/2009

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