

JUL 1 8 2005

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 29, 2005 08:00 AM
Secretary of State

DOCUMENT # M01000000710 1. Entity Name KISSIMMEE VALUE OUTLET SHOPS, L.L.C.	
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Principal Place of Business 481 CARLISLE DR. HERNDON, VA 20170	Mailing Address 481 CARLISLE DR. HERNDON, VA 20170
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07012005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-0796577	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

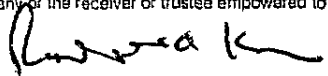
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM UNION LAND & MANAGEMENT 481 CARLISLE DR HERNDON, VA 201704830
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BAKER, DANIEL R 481 CARLISLE DR HERNDON, VA 201704830
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **Randall A. Kern**
AUTH. REP. **Auth. Rep.** 7/14/05 (703) 435-9335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #