

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038138

Entity Name: VILLAGE 24-7 KART AIDE, LLC

Current Principal Place of Business:

3974 COUNTY ROAD 201 #578
OXFORD, FL 34484

Current Mailing Address:

P.O. BOX 578
OXFORD, FL 34498

FEI Number: 45-2039953

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUFFFY, SEAN
309 WALTERS PLACE
FRUITLAND PARK, FL 34731 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title CEO
Name DUFFY, SEAN
Address 309 WALTERS PLACE
City-State-Zip: FRUITLAND PARK FL 34731

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SEAN DUFFY

CEO

02/17/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date