

**2016 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

03/04/2016

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date