

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000002135

**Entity Name:** KELLY'S ASSOCIATION MANAGEMENT LLC

**Current Principal Place of Business:**

191 PINE LANE  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

PO BOX 3965  
TALLAHASSEE, FL 32315 US

**FEI Number:** 26-1854462

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROJAS, COLLEEN E. "KELLY"  
191 PINE LANE  
CRAWFORDVILLE, FL 32327 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:** COLLEEN E. "KELLY" ROJAS

04/07/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ROJAS, KELLY  
Address 191 PINE LANE  
City-State-Zip: CRAWFORDVILLE FL 32327

*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:** COLLEEN E. "KELLY" ROJAS

MGR

04/07/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date