


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000042488 1. Entity Name KNC ENTERTAINMENT, LLC	
---	---

Principal Place of Business 6224 14TH STREET W. BRADENTON, FL 34207	Mailing Address 6224 14TH STREET W. BRADENTON, FL 34207
---	---



04232008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2783363	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER WESSLER ALHADEFF & SITTERSON, P.A. 150 WEST FLAGLER STREET, SUITE 2200 C/O CARLOS CANINO MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

DATE: 05/20/08-80031-019 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, CECIL 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, KEVIN 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONWAY, TIM 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, ANN 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  4/23/08 941-755-5505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #