

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094872

Entity Name: MCKISSACK GROUP LLC

FILED
Apr 27, 2008
Secretary of State

Current Principal Place of Business:

955 E KINGSFIELD ROAD
CANTONMENT, FL 32533 US

New Principal Place of Business:

Current Mailing Address:

955 E KINGSFIELD ROAD
CANTONMENT, FL 32533 US

New Mailing Address:

FEI Number: 26-2190171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKISSACK, WILLIAM E
955 E KINGSFIELD ROAD
CANTONMENT, FL 32533 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCKISSACK, WILLIAM E
Address: 955 E KINGSFIELD ROAD
City-St-Zip: CANTONMENT, FL 32533 US

Title: MGRM () Delete
Name: MCKISSACK, CAROLYN M
Address: 955 E KINGSFIELD ROAD
City-St-Zip: CANTONMENT, FL 32533 US

Title: MGRM () Delete
Name: KELSON, WILLIAM J III
Address: 955 E KINGSFIELD ROAD
City-St-Zip: CANTONMENT, FL 32533 US

Title: MGRM () Delete
Name: KELSON, KELLY M
Address: 955 E KINGSFIELD ROAD
City-St-Zip: CANTONMENT, FL 32533 US

Title: MGRM () Delete
Name: MCKISSACK, ERIC
Address: 10902 COUNTRY OSTRICH DRIVE
City-St-Zip: PENSACOLA, FL 32534 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: KELLY M KELSON

MGRM

04/27/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date