2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M02000001023

1. Entity Name

BAL HARBOUR BREAD, LLC



Feb 12, 2007 08:00 AM Secretary of State

FILED

Principal Place of Business

Mailing Address

2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220

2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220



DO NOT WRITE IN THIS SPACE

02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 27-0007888

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KIRK, WILLIAM N GOULD, COOKSEY, FENNELL ET AL, PA 979 BEACHLAND BLVD VERO BEACH, FL 32963

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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)

DATE

Filing Fee Is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAROLICK, H. ROGER 2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAYNE, LARRY F 2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WIGGINS, DALE E 2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALSH, WILLIAM J JR 2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR KIRK, ALBERT J 2414 NORTH WOODLAWN, STE. 201 WICHITA, KS 67220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WICHITA, KS 67220
11. I hereby certify that the information supplied with this filing does not qualify for the experience.	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

- WILLIAM V

Dat

Daytime Phone #