

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M03000000401**

1. Entity Name  
**BOYNTON BREAD, LLC**



Principal Place of Business  
**2414 NORTH WOODLAWN SUITE 201  
WICHITA, KS 67220**

Mailing Address  
**2414 NORTH WOODLAWN SUITE 201  
WICHITA, KS 67220**



02072007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**74-3078169**

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**

**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)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	KAROLICK, H. ROGER
STREET ADDRESS	2414 N. WOODLAWN #201
CITY - ST - ZIP	WICHITA, KS 67220
TITLE	MGR
NAME	WALSH, WILLIAM J JR.
STREET ADDRESS	2414 NORTH WOODLAWN SUITE 201
CITY - ST - ZIP	WICHITA, KS 67220
TITLE	MGR
NAME	PAYNE, LARRY F
STREET ADDRESS	2414 NORTH WOODLAWN SUITE 201
CITY - ST - ZIP	WICHITA, KS 67220
TITLE	MGR
NAME	WIGGINS, DALE E
STREET ADDRESS	2414 NORTH WOODLAWN SUITE 201
CITY - ST - ZIP	WICHITA, KS 67220
TITLE	MGR
NAME	MILLER, KENNETH R
STREET ADDRESS	2414 NORTH WOODLAWN SUITE 201
CITY - ST - ZIP	WICHITA, KS 67220
TITLE	MGR
NAME	KIRK, ALBERT J
STREET ADDRESS	2414 NORTH WOODLAWN SUITE 201
CITY - ST - ZIP	WICHITA, KS 67220

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02/21/07-80041-009 50.00

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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:** *William J Walsh Jr* **WILLIAM J WALSH JR**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*2/7/07*

Date

Daytime Phone #