## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M04000004012

1. Entity Name POMPANO BREAD, LLC



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

Principal Place of Business

2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220

Mailing Address

2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220



02072007 No Chg-LLC

CR2E083 (11/05)

4. FE! Number 20-1922581 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 979 BEACHLAND BOULEVARD VERO BEACH, FL 32964

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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	MGR			
NAME	KAROLICK, H. ROGER			
STREET ADDRESS	2414 N. WOODLAWN, SUITE 201			
CITY-ST-ZIP	WICHITA, KS 67220			
TITLE	MGR			
NAME	PAYNE, LARRY F			
STREET ADDRESS	2414 N. WOODLAWN, SUITE 201			
CITY-ST-ZIP	WICHITA, KS 67220			
TITLE	MGR			
NAME	WIGGINS, DALE E			
STREET ADDRESS	2414 N. WOODLAWN, SUITE 201			
CITY-ST-ZIP	WICHITA, KS 67220			
TITLE	MGR			
NAME	WALSH, WILLIAM L JR			
STREET ADDRESS	2414 N. WOODLAWN, SUITE 201			
CITY-ST-7IP	WICHITA, KS 67220			
TITLE	MGR			
NAME	KIRK, ALBERT J			
STREET ADDRESS	2414 N. WOODLAWN, SUITE 201			
CITY-ST-ZIP	WICHITA, KS 67220			
TITLE	MGR			
NAME	MILLER, KENNETH R			
STREET ADDRESS	2414 N. WOODLAWN, SUITE 201			
CITY-ST-ZIP	WICHITA, KS 67220			

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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:	Willi J.	Well William J WALSH,	JR 2/1/0
SIGNATURE	AND TYPED OR PRINTED NAME :	F SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date

Daytime Phone €