2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000000738

1. Entity Name
NORTHLAKE BREAD, LLC

Principal Place of Business

2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220

Mailing Address

2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220

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



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02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2016948

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

KIRK, WILLIAM N 979 BEACHLAND BOULEVARD VERO BEACH, FL 32964

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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

INDTF: Registered Apont signature required when reinstating

DATE

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

I	9.	MANAGING MEMBERS/MANAGERS
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAROLICK, H. ROGER 2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAYNE, LARRY F 2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WIGGINS, DALE E 2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALSH, WILLIAM J JR. 2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KIRK, ALBERT J 2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MILLER, KENNETH R 2414 N. WOODLAWN, SUITE 201 WICHITA, KS 67220

U00000632915 02/21/07-80041-006 50.00

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11. I hereby certify that the information supplied with this filling 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:

JRE: WILLIAM J WHILE WILLIAM J WALSH JR.
SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/7/07

Date

Daytime Phone #