

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000069795

Entity Name: KTED1, LLC

Current Principal Place of Business:

W26921 MESA LANE
ARCADIA, WI 54612

Current Mailing Address:

PO BOX 186
ARCADIA, WI 54612

FEI Number: 61-1655608

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RINGELSPAUGH, KEITH A
3347 49TH STREET NORTH
ST. PETERSBURG, FL 33710 US

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

Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	WANEK, KAREN A	Name	TODD, WANEK R
Address	W26921 MESA LANE	Address	W26921 MESA LANE
City-State-Zip:	ARCADIA WI 54612	City-State-Zip:	ARCADIA WI 54612

Title MNGR
Name HOLLOWAY, EDWARD
Address 3604 DUKE FIRTH ST.
City-State-Zip: LAND O LAKES FL 34638

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN A. WANEK

MEMBER

01/14/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date