## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000020

Entity Name: AMKI INVESTMENTS, LLC

FILED Apr 09, 2009 Secretary of State

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

411 43RD STREET EAST PALMETTO, FL 34221

**Current Mailing Address:** 

**New Mailing Address:** 

411 43RD STREET EAST PALMETTO, FL 34221 13235 US HWY 301, SUITE D PALMETTO, FL 34221

FEI Number: 65-0976227 FEI Number Applied For ( ) FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MORRELL, KEITH B 4509 WINDSOR CT. EAST BRADENTON, FL 34203 US KEARNEY, DANIEL 13235 US HWY 301, SUITE D PALMETTO, FL 34221 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: ALLEN MORRELL

04/09/2009

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM () Delete
Name: MORRELL, KEITH B

Address: 4509 WINDSOR CT. EAST City-St-Zip: BRADENTON, FL 34203

Title: MGRM ( ) Delete Name: MORRELL, ALLEN

Address: 3230 58TH TERRACE EAST City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: MORRELL, KEITH B
Address: 411 43RD STREET EAST
City-St-Zip: PALMETTO, FL 34221

Title: MGRM (X) Change ( ) Addition

Name: MORRELL, ALLEN
Address: 411 43RD STREET EAST
City-St-Zip: PALMETTO, FL 34221

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ALLEN MORRELL

MGRM 04/09/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date