

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009952

Entity Name: KMX TRANSPORTATION SERVICES, LLC

FILED
Feb 25, 2006
Secretary of State

Current Principal Place of Business:

4270 ALOMA AVE.
SUITE 124 - 52A
WINTER PARK, FL 32792

Current Mailing Address:

4270 ALOMA AVE.
SUITE 124 - 52A
WINTER PARK, FL 32792

New Principal Place of Business:

1399 SOUTH BELCHER RD
#71
CLEARWATER, FL 33771

New Mailing Address:

1399 SOUTH BELCHER RD
71
CLEARWATER, FL 33771

FEI Number: 59-3726429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KING, RICHARD A
Address: 4270 ALOMA AVE SUITE 124 - 52 A
City-St-Zip: WINTER PARK, FL 32792

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: SUP (X) Change () Addition
Name: SOWERSBY, CLAIRE
Address: 1399 SOUTH BELCHER ROAD #71
City-St-Zip: CLEARWATER, FL 33771 US

Title: SUP () Change (X) Addition
Name: KING, R. ANTHONY
Address: 1399 SOUTH BELCHER ROAD #71
City-St-Zip: CLEARWATER, FL 33771

I hereby certify that the information supplied with this filing does not qualify for the 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: R. ANTHONY KING

SUP

02/25/2006

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