

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 26, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000002466

1. Entity Name
K AIR, LLC



Principal Place of Business

**4536 STATE ROUTE 7
NEW WATERFORD, OH 44445**

Mailing Address

**4536 STATE ROUTE 7
NEW WATERFORD, OH 44445**



03182004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
30-0034631

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MEINERS, LOUIS M JR.
2598 L'ERMITAGE LANE
NAPLES, FL 34105**

**DO NOT WRITE
IN THIS SPACE**

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, 2004**

000000097031
03/26/04-80021-021 50.00

9. **MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	KUDLER, JEFFREY
STREET ADDRESS	4536 STATE ROUTE 7
CITY-ST-ZIP	NEW WATERFORD, OH 44445

TITLE	
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CITY-ST-ZIP	

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3-17-04