

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 24, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000009898

1. Entity Name  
KNIGHTS TRAIL EXCAVATING, LLC



Principal Place of Business  
1901 SOUTH TAMiami TRAIL  
VENICE, FL 34293

Mailing Address  
1901 SOUTH TAMiami TRAIL  
VENICE, FL 34293



01032008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 30-0081129	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

GUNDERSON, MIKE P ESQ  
1861 PLACIDA ROAD, SUITE 204  
ENGLEWOOD, FL 34223-4949

**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

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CLOUTIER, JACQUES 1901 S. TAMiami TRAIL SUITE A VENICE, FL 34293
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04/09/08-80068-003 148.75

**DO NOT WRITE  
IN THIS SPACE**

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

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

Date

Daytime Phone #

3-13-2008