2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000004206

1. Entity Name

KMG SANDLAKE, LLC



Principal Place of Business

13100 WEST COLONIAL DRIVE WINTER GARDEN, FL 34787-3953

Mailing Address

PO BOX 770338

WINTER GARDEN, FL 34777-0338

FILED Apr 15, 2008 8:00 am Secretary of State

04-15-2008 90102 050 ***138.75

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03282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number			Applied For
NOT APPLICABLE			Not Applicable
5. Certificate of Status Desired		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

MCPHERSON, REX V II 13100 WEST COLONIAL DR WINTER GARDEN, FL 34787

DO	NOT	WRITE
IN	THIS	SPACE

	4 1 .		
	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or both, in the State of Florida	a. I am familiar with, and accept
Soldivations:	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
After May	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75		
9,	MANAGING MEMBERS/MANAGERS	·	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGR MCPHERSON, REX VII 13100 WEST COLONIAL DRIVE WINTER GARDEN, FL 347873953		
TITLE		· ·	
NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WE	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPA	ICE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			
CITY+ST-ZIP		qualify for the exemptions contained in Chapter 119, Florida Statutes. I fu	other postify that the information
11. I bereby	certify that the information supplied with this filing does not	i quality for the exemptions contained in Chapter 119, Florida Statutes. 110	THE CELLIA HIST THE HUCKLISHOU

11. I hereby certify that the information supplied with this tiling does not quality for the exemptions contained in Chapter 119, Florida Statutes. Further certify that the information indicated on this report is true and accurate aper 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 prostee employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Kex V. MCPRet SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Rex V. McPherson, II

04/10/08

(407) 656-2291

Daytime Phone #