

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037182

Entity Name: K & M INVESTMENTS, LLC

FILED
Jan 09, 2006
Secretary of State

Current Principal Place of Business:

1738 BRUCE B DOWNS BLVD
WESLEY CHAPEL, FL 33523

New Principal Place of Business:

1738 BRUCE B DOWNS BLVD
WESLEY CHAPEL, FL 33543

Current Mailing Address:

1738 BRUCE B DOWNS BLVD
WESLEY CHAPEL, FL 33523

New Mailing Address:

1738 BRUCE B DOWNS BLVD
WESLEY CHAPEL, FL 33543

FEI Number: 20-0247036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ONDERKO, MEREDITH D
8703 BALLANTRAE WAY
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

ONDERKO, MEREDITH D
10607 CARROLLWOOD DRIVE
TAMPA, FL 33618 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:

01/09/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ONDERKO, MEREDITH D
Address: 8703 BALLANTRAE WAY
City-St-Zip: TAMPA, FL 33647

Title: MGRM () Delete
Name: BAILEY, KIM F
Address: 6602 GANT ROAD
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ONDERKO, MEREDITH D
Address: 10607 CARROLLWOOD DRIVE
City-St-Zip: TAMPA, FL 33618

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MEREDITH D. ONDERKO

MGRM

01/09/2006

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