

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037807

Entity Name: K & S PROPERTIES, LLC

FILED
Feb 22, 2006
Secretary of State

Current Principal Place of Business:

4660 DESTINY WAY
DESTIN, FL 32541

New Principal Place of Business:

3801 MISTY WAY
DESTIN, FL 32541

Current Mailing Address:

4660 DESTINY WAY
DESTIN, FL 32541

New Mailing Address:

3801 MISTY WAY
DESTIN, FL 32541

FEI Number: 20-2832980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KETCHERSID, WILLIAM L
4660 DESTINY WAY
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

KETCHERSID, WILLIAM L
3801 MISTY WAY
DESTIN, FL 32541 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: WILLIAM L KETCHERSID

02/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KETCHERSID, WILLIAM L
Address: 4660 DESTINY WAY
City-St-Zip: DESTIN, FL 32541

Title: MEM () Delete
Name: STEVENS, JAMES H JR.
Address: 4660 DESTINY WAY
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KETCHERSID, WILLIAM L
Address: 3801 MISTY WAY
City-St-Zip: DESTIN, FL 32541

Title: MEM (X) Change () Addition
Name: KETCHERSID, JODI L
Address: 3801 MISTY WAY
City-St-Zip: DESTIN, FL 32541

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: WILLIAM L KETCHERSID

MGRM

02/22/2006

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