


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT****FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90042 048 \*\*\*\*50.00

<b>DOCUMENT # L03000039745</b> 1. Entity Name <b>KENNETH A. COOK, LLC</b>	
---	---

Principal Place of Business  
2204 NE17TH AVE.  
CAPE CORAL, FL 33909Mailing Address  
2204 NE17TH AVE.  
CAPE CORAL, FL 33909**DO NOT WRITE IN THIS SPACE**

04292008 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**763131863**Applied For  
Not Applicable5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required**6. Name and Address of Current Registered Agent**COOK, KENNETH A  
2204 NE 17TH AVE.  
CAPE CORAL, FL 33909**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 reappointing)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006****9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	COOK, KENNETH A
STREET ADDRESS	2204 NE 17TH AVE.
CITY- ST- ZIP	CAPE CORAL, FL 33909
TITLE	ST
NAME	COOK, SHERRY L
STREET ADDRESS	2204 NE17TH AVE.
CITY- ST- ZIP	CAPE CORAL, FL 33909
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**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: Kenneth A. Cook

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

Date

Daytime Phone #