

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000047981

1. Entity Name
KCS CARPENTRY, LLC



Principal Place of Business
953 NW SPRUCE RIDGE DRIVE
STUART, FL 34994

Mailing Address
953 NW SPRUCE RIDGE DRIVE
STUART, FL 34994



01112005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0712340

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHWEIKERT, KENNETH C JR.
953 NW SPRUCE RIDGE DRIVE
STUART, FL 34994

**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 *Kenneth C Jr. Schweikert*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

2-12-05

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SCHWEIKERT, KENNETH C JR
953 NW SPRUCE RIDGE DRIVE
STUART, FL 34994

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1100000232405
02/16/05-80073-012 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 C Jr. Schweikert*

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

Date

Daytime Phone #

2/12/05 772-692-1744