2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000048329

1. Entity Name
K.M.D. INVESTMENTS, L.L.C.

Principal Place of Business	Mailing Address
7761 UPPER RIVER RD. TALLASSEE, AL 36078 US	7761 UPPER RIVER RD. TALLASSEE, AL 36078 US

DO NOT WRITE IN THIS SPACE

02242005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
20-0155102	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CAPES, MADONNA
36750 JEFFERSON AVE.
DADE CITY, FL 33523

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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 reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	DAILEY, KATHLEEN M
STREET ADDRESS	7761 UPPER RIVER RD.
CITY-ST-ZIP	TALLASSEE, AL 36078
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _Kathleen M Dailey_ MGR., KMD Investments 2/22/05 (334) 322-5500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #

Kathleen M Dailey