2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000048476

1. Entity Name

LARRY KURTH ELECTRIC, LLC



FILED Feb 07, 2008 08:00 Al Secretary of State

Principal Place of Business

16020 N.W. 130TH STREET WILLISTON, FL. 32696

Mailing Address

16020 N.W. 130TH STREET WILLISTON, FL 32696



DO NOT WRITE IN THIS SPACE

01152008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-2473689

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KURTH, LARRY A 16020 N.W. 130TH STREET WILLISTON, FL 32696

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

的代表的特殊	Signature, typied in printed name of registered agent and title if applicable.	Agent algorithm required when reinitating)
对外的对对对对对		
	NOWIN FEE IS \$138.75 75 75 75 76 76 77 77 77 77 77 77 77 77 77 77 77	。 "我们,你就看看了你的,你还是我们就是我的的我的的事情,你想像你可能将来,这一些我的多女,他看到她的女孩女孩,你是你们的不管的的是我们的来说,这一点,这一点,
17006625	AND THE HAVE CLASSED ON THE MANAGEMENT OF THE TRACKS	
2. 10 (10 10 10 10 10 10 10 10 10 10 10 10 10 1	MANAGING MEMBERS/MANAGERS	The state of the s
TITLE ***	MGR 11 LINEAR TO TAKE TO A SECTION OF THE TOTAL OF THE TO	
NAME	KURTH, LARRY A	, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	16020 NW 130TH ST.	
CITY-ST-ZIP	WILLISTON, FL 32696	
TITLE	77725-07-07-07-07-07-07-07-07-07-07-07-07-07-	
NAME		11.50 - 10.70 - 10.40 - 10.40
STREET ADDRESS	,	U00000818955 02/15/08-80063-021 138,75
CITY-ST-ZIP		02/15/08-80063-021 138.75
TITLE NAME		
STREET ADDRESS		
CITY-ST-ZIP	,	DO NOT WRITE
		111 THE ODA OF
TITLE Name		IN THIS SPACE
STREET ADDRESS		
CITY-ST-ZIP		· ·
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS	44	
CITY-ST-ZIP		
• .	certify that the information supplied with this filing close not qualify for the ex-	emotions contained in Chapter 119. Florida Statutes, I further certify that the information
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 cath; 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.		

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