

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052484

Entity Name: K & G EXCAVATING, LLC

FILED
Jan 30, 2009
Secretary of State

Current Principal Place of Business:

4944 MARTIN LUTHER KING JR. BLVD.
PLANT CITY, FL 33566 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 327
DOVER, FL 33527 US

New Mailing Address:

FEI Number: 61-1461995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRON, LETTICHIA I
401 MYSTIC COVE LN
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BARRON, EUGENE
Address: 401 MYSTIC COVE LANE
City-St-Zip: PLANT CITY, FL 33566 US

Title: MGRM () Delete
Name: BARRON, KEVIN D
Address: 510 MYSTIC COVE LANE
City-St-Zip: PLANT CITY, FL 33566 US

Title: MGRM () Delete
Name: BARRON, LETTICHIA I
Address: 401 MYSTIC COVE LANE
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LETTICHIA I BARRON

AGNT

01/30/2009

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