

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055316

FILED
Aug 14, 2006
Secretary of State

Entity Name: KREISER LLC

Current Principal Place of Business:

4880 GLADES CUT-OFF ROAD
FT. PIERCE, FL 34981

New Principal Place of Business:

Current Mailing Address:

4880 GLADES CUT-OFF ROAD
FT. PIERCE, FL 34981

New Mailing Address:

FEI Number: 20-0570175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

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: MGR () Delete
Name: KREISER, DANIEL E
Address: 4880 GLADES CUT-OFF ROAD
City-St-Zip: FT. PIERCE, FL 34981

Title: MGR () Delete
Name: FERRELL, SHANNON
Address: 4880 GLADES CUT-OFF ROAD
City-St-Zip: FT. PIERCE, FL 34981

Title: MGRM () Delete
Name: KREISER, DANIEL E
Address: 4880 GLADES CUT-OFF ROAD
City-St-Zip: FT. PIERCE, FL 34981

Title: MGRM () Delete
Name: FERRELL, SHANNON
Address: 4880 GLADES CUT-OFF ROAD
City-St-Zip: FT. PIERCE, FL 34981

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL KREISER

MGR

08/14/2006

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