

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008337

Entity Name: KS BUILDING GROUP LLC

FILED  
Mar 17, 2008  
Secretary of State

**Current Principal Place of Business:**

10591 SIR MICHAELS DRIVE  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 367411  
BONITA SPRINGS, FL 34136

**New Mailing Address:**

FEI Number: 20-0703353

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KRASS, HOWARD W MGRM  
10591 SIR MICHAELS DRIVE  
BONITA SPRINGS, FL 34135 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: KRASS, HOWARD W MGRM  
Address: 10591 SIR MICHAELS DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM ( ) Delete  
Name: SHUTOK, ROBERT A MGRM  
Address: 3506 ARCLIGHT COURT  
City-St-Zip: FORT MYERS, FL 33916

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: SHUTOK, ROBERT A MGRM  
Address: 733 LONG ISLAND ST. E  
City-St-Zip: LEHIGH ACRES, FL 33974

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: ROBERT A. SHUTOK

MGRM

03/17/2008

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