

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009383

FILED
May 12, 2005
Secretary of State

Entity Name: KAYAK FISHING ACCESSORIES LLC

Current Principal Place of Business:

297 EAGLET WAY
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

297 EAGLET WAY
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

ANSBAUGH, SCOTT
297 EAGLET WAY
LAKE MARY, FL 32746 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/MEMBERS:

Title: MGRM () Delete
Name: ANSBAUGH, SCOTT
Address: 297 EAGLET WAY
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM () Delete
Name: ROBERTS, RICHARD
Address: 5224 WEST STATE ROAD 46
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: DAUBERT, KEN
Address: 3323 S.E. 2ND STREET
City-St-Zip: OCALA, FL 34471 US

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 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 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: SCOTT ANSBAUGH

MGRM

05/12/2005

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