

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019232

Entity Name: KMK HOLDINGS LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

126 W PLANT ST
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

126 W PLANT ST
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 20-0885927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHTON, KATHLEEN L
126 WEST PLANT STREET
WINTER GARDEN, FL 34787 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/MEMBERS:

Title: MGRM () Delete
Name: KAZMAIER, KURT A
Address: 84 WINDTREE LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM () Delete
Name: GARNER, MITCHELL A
Address: 84 WINDTREE LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM () Delete
Name: ASHTON, KATHLEEN L
Address: 985 ALMOND TREE CIRCLE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: ASHTON, KATHLEEN L
Address: 126 W PLANT STREET
City-St-Zip: WINTER GARDEN, FL 34787

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: KATHLEEN ASHTON

MGRM

04/29/2005

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