

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029415

Entity Name: G & K OF SOUTH FLORIDA, LLC

FILED
Jul 15, 2006
Secretary of State

Current Principal Place of Business:

14061 RIVER RD
FT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

14061 RIVER RD
FT MYERS, FL 33905

New Mailing Address:

FEI Number: 20-1016476 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:

PRIBRAMSKY, STEVEN R
937 FLEMING STREET
KEY WEST, FL 33040 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: MGR () Delete
Name: MEYER, NATHAN J
Address: 14061 RIVER RD
City-St-Zip: FT MYERS, FL 33905

Title: MGRM () Delete
Name: MEYER, WENDY L
Address: 14061 RIVER RD
City-St-Zip: FT MYERS, FL 33905

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: MEYER, WENDY M
Address: 14061 RIVER RD
City-St-Zip: FT MYERS, FL 33905

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: NATHAN J.MEYER

MGR

07/15/2006

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