2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043278

Entity Name: K.S.A. ENTERPRISES, LLC

FILED Apr 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1107 WEST MARION AVENUE, SUITE 112 PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

1107 WEST MARION AVENUE, SUITE 112 3060 COMPTON COURT PUNTA GORDA, FL 33950 ALPHARETTA, GA 30022

FEI Number: 20-1293992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FILEMAN, GARY T 1107 WEST MARION AVENUE, SUITE 112 PUNTA GORDA, FL 33950 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:

City-St-Zip:

Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: () Delete Title: () Change (X) Addition SHARPENBERG, ROBERT H Name: Name: Address: Address: 3060 COMPTON COURT City-St-Zip: City-St-Zip: ALPHARETTA, GA 20033 US () Change (X) Addition Title: Title: MGRM () Delete Name: Name: KATES, STEVEN Address: Address: 2 BIRCH PARKWAY City-St-Zip: City-St-Zip: SPARTA, NJ 07871 US Title: () Delete Title: MGRM () Change (X) Addition Name: AGULNEK, ARTHUR Name: Address: Address: 3601 EMILY DRIVE

City-St-Zip:

PLANO, TX 75093 US

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: ROBERT H. SHARPENBERG MGRM 04/13/2005