

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043278

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

FILED
Apr 07, 2007
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

3060 COMPTON COURT
ALPHARETTA, GA 30022

New Mailing Address:

FEI Number: 20-1293992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILEMAN, GARY T
1107 WEST MARION AVENUE, SUITE 112
PUNTA GORDA, FL 33950 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: SHARPENBERG, ROBERT H
Address: 3060 COMPTON COURT
City-St-Zip: ALPHARETTA, GA 20033 US

Title: MGRM () Delete
Name: KATES, STEVEN
Address: 2 BIRCH PARKWAY
City-St-Zip: SPARTA, NJ 07871 US

Title: MGRM () Delete
Name: AGULNEK, ARTHUR
Address: 3601 EMILY DRIVE
City-St-Zip: PLANO, TX 75093 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHARPENBERG, ROBERT H
Address: 3060 COMPTON COURT
City-St-Zip: ALPHARETTA, GA 30022 US

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 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 H. SHARPENBERG

MGRM

04/07/2007

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