

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051157

Entity Name: K RENEE & ASSOCIATES, LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

5703 RED BUG LAKE RD SUITE 277
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

5703 RED BUG LAKE RD SUITE 277
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISK, KEITH A II
3196 S. ST. LUCIE DRIVE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

FISK, KEITH A II
1208 STONE HARBOUR ROAD
WINTER SPRINGS, FL 32708 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: KEITH A FISK, II

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FISK, KEITH A II
Address: 3196 S. ST. LUCIE DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: MGR () Delete
Name: FISK, GLORIA G
Address: 3196 S. ST. LUCIE DRIVE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FISK, KEITH A II
Address: 5703 RED BUG LAKE ROAD, #277
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGR (X) Change () Addition
Name: FISK, GLORIA G
Address: 5703 RED BUG LAKE ROAD, #277
City-St-Zip: WINTER SPRINGS, FL 32708

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: KEITH A FISK, II

MGR

04/29/2005

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