

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053620

FILED  
Jan 19, 2006  
Secretary of State

Entity Name: H & K PROPERTY RESTORATION, LLC

**Current Principal Place of Business:**

1978 SO. TAMIAMI TR.  
STE. #4  
VENICE, FL 34293

**New Principal Place of Business:**

**Current Mailing Address:**

1978 SO. TAMIAMI TR.  
STE. #4  
VENICE, FL 34293

**New Mailing Address:**

FEI Number: 20-1359499      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KOWALCZYK, DARLENE  
1978 SO. TAMIAMI TR.  
STE. #4  
VENICE, FL 34293 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: KOWALCZYK, DARLENE  
Address: 1978 SO. TAMIAMI TR.  
City-St-Zip: VENICE, FL 34293

Title: MGRM ( ) Delete  
Name: KOWALCZYK, JOE  
Address: 1978 SO. TAMIAMI TR.  
City-St-Zip: VENICE, FL 34293

Title: MGR ( ) Delete  
Name: HEWITT, DONNA  
Address: 9048 FALCON COURT  
City-St-Zip: VENICE, FL 34293

Title: MGRM ( ) Delete  
Name: HEWITT, STEVE  
Address: 9048 FALCON COURT  
City-St-Zip: VENICE, FL 34293

**ADDITIONS/CHANGES:**

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

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

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: DARLENE KOWALCZYK      M      01/19/2006

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