2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063044

City-St-Zip:

Entity Name: K & M COMPLETE SERVICES LLC

FILED Apr 26, 2006 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:				
809 E OAK ST SUITE 106 KISSIMMEE, FL 34744				13526 MARIA DRIVE HUDSON, FL 34667				
Current Mailing Address:				New Mailing Address:				
809 E OAK ST SUITE 106 KISSIMMEE, FL 34744				13526 MARIA DRIVE HUDSON, FL 34667				
FEI Number:	20-4384256	FEI Number Applied For()	FEI Nun	nber Not App	licable ()	Certific	ate of Status Des	sired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
MURPHY, PAMELA J 809 E OAK ST TUITE 106 KISSI MMEE, FL 34744 US				MURPHY, PAMELA J 1874 BOGGY CREEK RD KISSI MMEE, FL 34744 US				
The above in the State		ubmits this statement for th	e purpose o	f changing i	ts registered	office or	registered age	nt, or both,
SIGNATURE: PAMELA J MURPHY				04/26/2006				
	Electron	ic Signature of Registered A	Agent				Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:				
Title: Name: Address: City-St-Zip:	MGRM () BRUNER, KEVIN 5006 CULBERT GREENVILLE, C	SON RD		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MURPHY, PA 1874 BOGGY	MELA J CREEK R	(X) Addition	
Title: Name:	()	Delete		Title: Name:	MGRM (CHARD J	(X) Addition	

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.

City-St-Zip: HUDSON, FL 34667

SIGNATURE: PAMELA J MURPHY MGRM 04/26/2006