2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2006
Secretary of State

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Entity Name: K&M PROPERTIES OF SEBRING LLC

Current Principal Place of Business:

3001 CEDORA TERR
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

3001 CEDORA TERR
SEBRING, FL 33870

New Mailing Address:

FEI Number: 20-2923597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEE, DENNIS
3001 CEDORA TERR
SEBRING, FL 33870 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:	KANE, FRANK	
Address:	4409 SELAH RD	
City-St-Zip:	SEBRING, FL 33875	
Title:	MGR	( ) Delete
Name:	MEE, DENNIS	
Address:	3001 CEDORA TERR	
City-St-Zip:	SEBRING, FL 33870	
Title:	MGRM	( ) Delete
Name:	KANE, APRIL E	
Address:	4409 SELAH RD	
City-St-Zip:	SEBRING, FL 33875	
Title:	MGRM	( ) Delete
Name:	MEE, KATHY	
Address:	3001 CEDORA TERR	
City-St-Zip:	SEBRING, FL 33870	

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: FRANK KANE MGR 03/07/2006

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