

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071462

Entity Name: KMO HOLDINGS LLC

FILED
Feb 01, 2005
Secretary of State

Current Principal Place of Business:

181 OAK COMMON AVENUE
ST. AUGUSTINE, FL 32095 US

New Principal Place of Business:

308 MONTEREY VILLA COURT
ST. AUGUSTINE, FL 32095 US

Current Mailing Address:

181 OAK COMMON AVENUE
ST. AUGUSTINE, FL 32095 US

New Mailing Address:

308 MONTEREY VILLA COURT
ST. AUGUSTINE, FL 32095 US

FEI Number: 20-1689240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, C R
9250 BAYMEADOWS RD
450
JACKSONVILLE, FL 32256 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/MEMBERS:

Title: MGRM () Delete
Name: ORR, BRUCE
Address: 181 OAK COMMON AVENUE
City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: MGRM () Delete
Name: HOLDEN, KAREN
Address: 181 OAK COMMON AVENUE
City-St-Zip: ST. AUGUSTINE, FL 32095 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ORR, BRUCE
Address: 308 MONTEREY VILLA COURT
City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: MGRM (X) Change () Addition
Name: HOLDEN, KAREN
Address: 308 MONTEREY VILLA COURT
City-St-Zip: ST. AUGUSTINE, FL 32095 US

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: BRUCE N. ORR

MGRM

02/01/2005

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