

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000084634

FILED
Sep 10, 2005
Secretary of State

Entity Name: KTRON TECHNOLOGIES LLC

Current Principal Place of Business:

500 ACME ST. #501
JACKSONVILLE, FL 32211

New Principal Place of Business:

P.O. BOX 11727
JACKSONVILLE, FL 32239

Current Mailing Address:

500 ACME ST. #501
JACKSONVILLE, FL 32211

New Mailing Address:

P.O. BOX 11727
JACKSONVILLE, FL 32239

FEI Number: 20-2212011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBEAUX, KELVIN
500 ACME ST. #501
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

LEBEAUX, KELVIN
11261 BROCKTON PLACE
JACKSONVILLE, FL 32257 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: KELVIN LEBEAUX

09/10/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEBEAUX, KELVIN
Address: 500 ACME ST. #501
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGRM () Delete
Name: LEBEAUX, JOANN
Address: 500 ACME ST. #501
City-St-Zip: JACKSONVILLE, FL 32211

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEBEAUX, KELVIN
Address: 11261 BROCKTON PLACE
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGRM (X) Change () Addition
Name: LEBEAUX, JOANN
Address: 11261 BROCKTON PLACE
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGR () Change (X) Addition
Name: QUADE, DAVID
Address: 44547 CLARKS MILL ROAD
City-St-Zip: HOLLYWOOD, MD 20636

Title: MGR () Change (X) Addition
Name: MINOR, ETHEL
Address: 20263 MICHELLE DRIVE
City-St-Zip: GREAT MILLS, MD 20634

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: KELVIN LEBEAUX

MGRM

09/10/2005

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