

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000086014

**FILED**  
**Apr 22, 2007**  
**Secretary of State**

**Entity Name:** KARPENTER KEN MCEWEN LLC

**Current Principal Place of Business:**

113 MISSISSIPPI AVE.  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

113 MISSISSIPPI AVE.  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

**FEI Number:** 16-1711681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCEWEN, SHANNON M  
113 MISSISSIPPI AVE.  
FORT WALTON BEACH., FL 32548 US

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

MCEWEN, SHANNON I  
113 MISSISSIPPI AVE.  
FORT WALTON BEACH., FL 32548 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: SHANNON I. MCEWEN

04/22/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MCEWEN, KEN C  
Address: 113 MISSISSIPPI AVE.  
City-St-Zip: FORT WALTON BEACH, FL 32548

**ADDITIONS/CHANGES:**

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: KEN C. MCEWEN

MGR

04/22/2007

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