

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000087235

Entity Name: KLK FITZ, LLC

**FILED**  
**Apr 12, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

1685 N. ROCK SPRINGS ROAD  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

15044 DRY RUN  
TAVARES, FL 32778

**New Mailing Address:**

FEI Number: 35-2243692

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WHEELER, RICHARD S  
2265 LEE ROAD, SUITE 103  
WINTER PARK, FL 32789 US

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

WHEELER, RICHARD S  
2265 LEE ROAD, SUITE 117  
WINTER PARK, FL 32789 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:

04/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FITZPATRICK, KEVIN D SR.  
Address: 15044 DRY RUN  
City-St-Zip: TAVARES, FL 32778

**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: KEVIN D. FITZPATRICK SR.

MGRM

04/12/2006

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