

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016673

Entity Name: MKB, L.L.C.

FILED
Feb 02, 2007
Secretary of State

Current Principal Place of Business:

399 SNOW DRIVE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

399 SNOW DRIVE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 20-2350411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERICKSON, KENNETH D
399 SNOW DRIVE
FORT MYERS, FL 33919 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: MGRM () Delete
Name: ERICKSON, KENNETH D
Address: 399 SNOW DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM () Delete
Name: BOLEBRUCH, MICHAEL
Address: 5716 FLAMINGO DRIVE
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM () Delete
Name: VIGNE, ROBERT A
Address: 399 SNOW DRIVE
City-St-Zip: FORT MYERS, FL 33919

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:

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: KENNETH D. ERICKSON

MGR

02/02/2007

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