

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000041130

Entity Name: LKS, LLC

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

738 COUNTRY CLUB RD. N.  
ST. PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

901 COUNTRY CLUB RD. N.  
ST. PETERSBURG, FL 33710

**New Mailing Address:**

FEI Number: 83-0432322

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEAVENGOOD, POLLY  
901 COUNTRY CLUB RD. N.  
ST. PETERSBURG, FL 33710 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: MGR  
Name: LEAVENGOOD, POLLY  
Address: 901 COUNTRY CLUB RD. N.  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGRM  
Name: STEWART, SANDRA T  
Address: 1205 79TH STREET S.  
City-St-Zip: ST. PETERSBURG, FL 33707

Title: MGRM  
Name: KOPMEIER, ANNE  
Address: 1205 79TH STREET S.  
City-St-Zip: ST. PETERSBURG, FL 33707

I hereby 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: POLLY LEAVENGOOD

MGR

04/22/2010

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