## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000048803

Entity Name: KAT, LLC

City-St-Zip:

HOMOSASSA, FL 34448

FILED Feb 05, 2006 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 2345 S COLEMAN AVE. HOMOSASSA, FL 34448 **Current Mailing Address: New Mailing Address:** 2345 S COLEMAN AVE HOMOSASSA, FL 34448 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ADAMS, MICHELE M 2345 S COLEMAN AVE HOMOSASSA, FL 34448 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition ADAMS, MICHELE M Name: Name: Address: 2345 S COLEMAN AVE. Address: City-St-Zip: HOMOSASSA, FL 34448 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: ADAMS, WILLIAM C Name: Address: 2345 S COLEMAN AVE. Address:

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.

City-St-Zip:

SIGNATURE: MICHELE M ADAMS MGRM 02/05/2006