

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057419

FILED
Mar 04, 2009
Secretary of State

Entity Name: C K T LLC

Current Principal Place of Business:

9942 CR 44
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

9942 CR 44
LEESBURG, FL 34788

New Mailing Address:

FEI Number: 20-2972291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, CRAIG D
9942 C R 44
LEESBURG, FL 34788 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 () Delete
Name: BUCKLEY, KEVIN F
Address: 4343 SHALLOWFORD ROAD SUITE G3
City-St-Zip: MARIETTA, GA 30062

Title: MGR () Delete
Name: BROWN, CRAIG D
Address: 9942 C R 44
City-St-Zip: LEESBURG, FL 34788

Title: MGR () Delete
Name: PORTARO, THOMAS M
Address: 4343 SHALLOWFORD RD SUITE G3
City-St-Zip: MARIETTA, GA 30062

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 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: CRAIG D BROWN

MGR

03/04/2009

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