

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 16, 2007 08:00 A
Secretary of State

DOCUMENT # L05000067045

1. Entity Name

M & K DEVELOPMENT, L.C.



Principal Place of Business

**1205 E. KNIGHTS GRIFFIN ROAD
PLANT CITY, FL 33565**

Mailing Address

**1205 E. KNIGHTS GRIFFIN ROAD
PLANT CITY, FL 33565**



03092007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-3142602

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TANCREDO, CHISTOPHER A ESQ.
THE TANCREDO LAW FIRM, P.A.
1306 THONOTOSASSA ROAD
PLANT CITY, FL 33563-4336**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
KIRKLAND, ROBERT
1205 E. KNIGHTS GRIFFIN ROAD
PLANT CITY, FL 33565**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MARCHNER, MICHAEL
1205 E. KNIGHTS GRIFFIN ROAD
PLANT CITY, FL 33565**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000668795
03/27/07-60045-012 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3/14/07 (813) 716-5793