


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90020 014 ****50.00

DOCUMENT # L05000069141	
1. Entity Name DKC HOLDINGS II, LLC	

Principal Place of Business 1206 EAST RIDGEWOOD STREET ORLANDO, FL 32803	Mailing Address 1206 EAST RIDGEWOOD STREET ORLANDO, FL 32803
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20034162



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03062006 Chg-LLC CR2E083 (11/05)

4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BRYAN, CARLA DELOACH 1206 EAST RIDGEWOOD STREET ORLANDO, FL 32803		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code

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, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Kimberly Culpepper K. Culpepper March 7, 2006 401-740-5005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT
MILLERDELOACH
ATTORNEYS & COUNSELORS AT LAW

March 7, 2006

20034162
#C05000069141

Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Annual Business Report for DKC Holdings II, LLC

Dear Sir or Madam:

Enclosed please find the 2006 Uniform Business Report for DKC Holdings II, LLC and a check, made payable to the Florida Department of State in the amount of fifty dollars (\$50.00).

If you have any questions regarding this filing, please contact my office.

I remain

Very truly yours,



Rebekah M. Kurdziel
For the Firm

RMK/js
enclosures