

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069919

Entity Name: K & M DECKS AND DOCKS, LLC

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

1784 SW JUDY GLN.
LAKE CITY, FL 32025

New Principal Place of Business:

59 LATRELLE LANE
WAVERLY, GA 31565

Current Mailing Address:

1784 SW JUDY GLN.
LAKE CITY, FL 32025

New Mailing Address:

59 LATRELLE LANE
WAVERLY, GA 31565

FEI Number: 20-2925982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTCHLETT, KATHLEEN
1784 SW JUDY GLN.
LAKE CITY, FL 32025 US

Name and Address of New Registered Agent:

BARTCHLETT, KATHLEEN
59 LATRELLE LANE
WAVERLY, FL 31565 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: KATHLEEN BARTCHLETT

04/28/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BARTCHLETT, KATHLEEN
Address: 1784 SW JUDY GLN.
City-St-Zip: LAKE CITY, FL 32025

Title: MGRM () Delete
Name: BARTCHLETT, MICHAEL
Address: 1784 SW JUDY GLN.
City-St-Zip: LAKE CITY, FL 32025

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BARTCHLETT, KATHLEEN
Address: 59 LATRELLE LANE
City-St-Zip: WAVERLY, GA 31565

Title: MGRM (X) Change () Addition
Name: BARTCHLETT, MICHAEL
Address: 59 LATRELLE LANE
City-St-Zip: WAVERLY, GA 31565

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: MICHAEL BARTCHLETT

MGRM

04/28/2007

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