

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086133

FILED
May 15, 2007
Secretary of State

Entity Name: KNOWLES RESIDENTIAL MAINTENANCE LLC

Current Principal Place of Business:

7820 NORTH JEFFERSON
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

7820 NORTH JEFFERSON
MONTICELLO, FL 32344

New Mailing Address:

FEI Number: 30-0332092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KNOWLES, GRANVILLE J
7820 NORTH JEFFERSON
MONTICELLO, FL 32344 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: KNOWLES, GRANVILLE
Address: 7820 NORTH JEFFERSON
City-St-Zip: MONTICELLO, FL 32344

Title: MGRM () Delete
Name: KNOWLES, TRACEY
Address: 7820 NORTH JEFFERSON
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES:

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: GRANVILLE J. KNOWLES

MGR

05/15/2007

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