

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000094426

FILED
Feb 01, 2007
Secretary of State

Entity Name: K & S SRQ LLC

Current Principal Place of Business:

15 PARADISE PLAZA
SUITE 188
SARASOTA, FL 34239

New Principal Place of Business:

2558 MARBLEHEAD DRIVE
SARASOTA, FL 34231

Current Mailing Address:

2558 MARBLEHEAD DR
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 51-0555285 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMANSKI, KATHEY
2558 MARBLEHEAD DR
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

KIRTLEY, PHYLLIS A D
2558 MARBLEHEAD DR
SARASOTA, FL 34231 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: PHYLLIS KIRTLEY

02/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHMANSKI, KATHEY
Address: 15 PARADISE PLAZA
City-St-Zip: SARASOTA, FL 34239

Title: MGR () Delete
Name: KIRTLEY, PHYLLIS
Address: 2558 MARBLEHEAD DR
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHMANSKI, KATHEY K MGRM
Address: 2558 MARBLEHEAD DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Change () Addition
Name: KIRTLEY, PHYLLIS A D
Address: 2558 MARBLEHEAD DR
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHEY SCHMANSKI

MGRM

02/01/2007

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