2007 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Apr 11, 2007 08:00 A Secretary of State DOCUMENT # L05000111693 1. Entity Name K AND J LLC Principal Place of Business Mailing Address 430 S. RAMONA AVENUE 430 S. RAMONA AVENUE LAKE ALFRED, FL 33850 LAKE ALFRED, FL 33850 04072007No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 75-3203821 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BRILEY, JUDITH DO NOT WRITE 430 S. RAMONA AVENUE LAKE ALFRED, FL 33850 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** Skonetu (NOTE: Registered Agent signature regulared when reinstating Filing Fee Is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. **MGRM** TITLE NAME BRILEY-LOVE, KELLY **8033 SOLITAIRE COURT** STREET ADDRESS ORLANDO, FL 32869 CITY-ST-ZIP MGRM TITLE U00000699613 04/19/07-80049-017 50.09 NAME BRILEY, JUDITH 430 S. RAMONA AVENUE STREET ADDRESS CITY-ST-ZIP LAKE ALFRED, FL 33850 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

NAME STREET ADDRESS

Daytime Phone #