


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008 08:00 A
Secretary of State


DOCUMENT # L06000000729
 1. Entity Name
 KFB HOLDINGS, LLC



Principal Place of Business
 312 CLUB COVE DRIVE
 TITUSVILLE, FL 32780

Mailing Address
 PO BOX 2266
 MURRELLS INLET, SC 29576

DO NOT WRITE IN THIS SPACE



03122008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4051171	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SKATOFF, JEFFREY H
 2101 BOCA RATON BLVD
 1
 BOCA RATON, FL 33431

DO NOT WRITE 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 _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

05/01/08-80030-025 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HYATT, KEN C 312 CLUB COVE DRIVE TITUSVILLE, FL 32780
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HYATT, CHARLES F 4415 INDIGO LANE MURRELLS INLET, SC 29576
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HYATT, CHARLES E 1405 WILMINGTON WAY GRAYSON, GA 30017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Ken Hyatt* Member 4-17-08 843-222-4513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #