

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005215

Entity Name: KIRK SERVICES LLC

FILED
Feb 01, 2007
Secretary of State

Current Principal Place of Business:

6226 BLACKBERRY LANE
BRADENTON, FL 34202 US

New Principal Place of Business:

2901 BABB ROAD
KISSIMMEE, FL 34746 US

Current Mailing Address:

6226 BLACKBERRY LANE
BRADENTON, FL 34202 US

New Mailing Address:

2901 BABB ROAD
KISSIMMEE, FL 34746 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRK, JOAN R
6226 BLACKBERRY LANE
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

KIRK, JOAN R
2901 BABB ROAD
KISSIMMEE, FL 34746 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: JOAN KIRK

02/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KIRK, KENNETH L
Address: 6226 BLACKBERRY LANE
City-St-Zip: BRADENTON, FL 34202 US

Title: MGRM () Delete
Name: KIRK, JOAN R
Address: 6226 BLACKBERRY LANE
City-St-Zip: BRADENTON, FL 34202 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KIRK, KENNETH L
Address: 2901 BABB ROAD
City-St-Zip: KISSIMMEE, FL 34746 US

Title: MGRM (X) Change () Addition
Name: KIRK, JOAN R
Address: 2901 BABB ROAD
City-St-Zip: KISSIMMEE, FL 34746 US

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: JOAN KIRK

MGRM

02/01/2007

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