

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L06000020045

1. Entity Name  
KJF BUILDERS, LLC



Principal Place of Business  
14727 CALUSA PALMS DRIVE  
FT. MYERS, FL 33919 US  
Mailing Address  
14727 CALUSA PALMS DRIVE  
104  
FT. MYERS, FL 33919 US

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

01102008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number 20-4371332	Applied For
	Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FOLLIARD, KENNETH J  
14727 CALUSA PALMS DRIVE  
104  
FT. MYERS, FL 33919

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

*Kenneth J. Foliard*

1/12/08

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME FOLLIARD, KENNETH J  
STREET ADDRESS 14727 CALUSA PALMS DRIVE  
CITY-ST-ZIP FT. MYERS, FL 33919

10. ADDITIONS/CHANGES

TITLE MGR  
NAME FOLLIARD, KENNETH J  
STREET ADDRESS 14727 CALUSA PALMS DRIVE  
CITY-ST-ZIP FT. MYERS, FL 33919

TITLE MGR  
NAME FOLLIARD, KENNETH J JR.  
STREET ADDRESS 14727 CALUSA PALMS DRIVE  
CITY-ST-ZIP FT. MYERS, FL 33919

TITLE MGR  
NAME FOLLIARD, KENNETH J JR.  
STREET ADDRESS 14727 CALUSA PALMS DRIVE  
CITY-ST-ZIP FT. MYERS, FL 33919

TITLE MGR  
NAME FOLLIARD, JOSEPH M  
STREET ADDRESS 14727 CALUSA PALMS DRIVE  
CITY-ST-ZIP FT. MYERS, FL 33919

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NAME FOLLIARD, JOSEPH M  
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NAME FOLLIARD, JOSEPH M  
STREET ADDRESS 14727 CALUSA PALMS DRIVE  
CITY-ST-ZIP FT. MYERS, FL 33919

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: *Kenneth J. Foliard*

MGR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/12/08 816 814 9489

**FILED  
Jan 14, 2008 8:00 am  
Secretary of State**

01-14-2008 90042 014 \*\*\*138.75

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