

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000025761

1. Entity Name
KAK HOLDINGS, LLC



FILED
Jul 14, 2008 08:00 AM
Secretary of State

Principal Place of Business
2019 OSPREY LANE
LUTZ, FL 33548

Mailing Address
2019 OSPREY LANE
LUTZ, FL 33548



07082008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4755942

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MELLOTT, RODNEY N
2019 OSPREY LANE
LUTZ, FL 33548

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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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

000000954807
07/14/08-80015-013 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CAROLLO, ANDRE
STREET ADDRESS	2019 OSPREY LANE
CITY-ST-ZIP	LUTZ, FL 33548
TITLE	MGRM
NAME	FAIR, KEITH J
STREET ADDRESS	10115 CURLEY ROAD
CITY-ST-ZIP	SAN ANTONIO, FL 33576
TITLE	MGRM
NAME	KUZLER, KEITH
STREET ADDRESS	6125 EVERLASTING PLACE
CITY-ST-ZIP	LAND O'LAKES, FL 34639
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

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

Date

Daytime Phone

7/10/08

813-909-7770