

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043457

**FILED**  
**Apr 10, 2008**  
**Secretary of State**

**Entity Name:** K. WIGGINS & ASSOCIATES, LLC

**Current Principal Place of Business:**

19046 B B DOWNS BLVD  
302  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

19046 B B DOWNS BLVD  
302  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 20-4735400      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THE HOUSE OF TAXES LLC  
15108 HEATHRIDGE DR  
TAMPA, FL 33625 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WIGGINS, KENNETH E  
Address: 18102 LATIMER LANE  
City-St-Zip: TAMPA, FL 33647

Title: MGR ( ) Delete  
Name: ROBERTS, VICKIE  
Address: PO BOX 1078  
City-St-Zip: WINONA, MS 38976

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES E HENDERSON

MRS

04/10/2008

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