

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 07, 2009  
Secretary of State**

DOCUMENT# L06000045399

Entity Name: K AND V, LLC.

**Current Principal Place of Business:**

2633 POWERS AVENUE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

2633 POWERS AVENUE  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 20-4968819      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GURR, VICKI  
2633 POWERS AVENUE  
JACKSONVILLE, FL 32207      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: MGR      ( ) Delete  
Name: GURR, KEITH  
Address: 2633 POWERS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR      ( ) Delete  
Name: GURR, VICKI  
Address: 2633 POWERS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32207

**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: VICKI GURR

TS

01/07/2009

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