

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L06000069467**

1. Entity Name  
**KENDRICK ENTERPRISES, LLC**



Principal Place of Business  
**2216 HAMPSTEAD MEWS  
MONTGOMERY, AL 36117**

Mailing Address  
**2216 HAMPSTEAD MEWS  
MONTGOMERY, AL 36117**



01042008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-5193668</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**HUNTER, KIRK  
412 BAY OAKS  
DESTIN, FL 32541**

**DO NOT WRITE  
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 Kirk Hunter  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-18-08  
DATE

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

**U00000876358  
04/11/08-80085-006 138.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KENDRICK, DEWEY P JR 2216 HAMPSTEAD MEWS MONTGOMERY, AL 36117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KENDRICK, CHARLENE 2216 HAMPSTEAD MEWS MONTGOMERY, AL 36117
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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: Dewey Kendrick (Dewey Kendrick)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-26-08 334-546-0325  
Date Daytime Phone #