2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2007
Secretary of State

DOCUMENT# L06000072049

Entity Name: K & A LLC

Current Principal Place of Business:

569 REMINGTON OAK DR.
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

569 REMINGTON OAK DR.
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 20-5250796 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD.
SUITE 400
MIAMI BEACH, FL 33139 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: FOY, SAMUEL A
Address: 569 REMINGTON OAK DR.
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM ( ) Delete
Name: WYNSMA, KEITH A
Address: 569 REMINGTON OAK DR.
City-St-Zip: LAKE MARY, FL 32746 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LYONS, LEONARD C
Address: 2643 ST. GEORGE DR.
City-St-Zip: DAVENPORT, FL 33837 US

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

Title: MGRM ( ) Change (X) Addition
Name: HUDSON, JUDY P
Address: 2643 ST. GEORGE DR.
City-St-Zip: DAVENPORT, FL 33837 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KEITH WYNSMA MGRM 03/06/2007

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