

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101824

Entity Name: K & A TRANSPORTING, LLC

FILED
Jan 17, 2007
Secretary of State

Current Principal Place of Business:

8478 JAMESTOWN DRIVE
WINTER HAVEN, FL 33884

New Principal Place of Business:

925 DEMING DR
WINTER HAVEN, FL 33880

Current Mailing Address:

8478 JAMESTOWN DRIVE
WINTER HAVEN, FL 33884

New Mailing Address:

PO BOX 1223
WINTER HAVEN, FL 33882

FEI Number: 20-5722553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIGO, VICTOR JR
8478 JAMESTOWN DRIVE
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

VIGO, VICTOR A JR
925 DEMING DR
WINTER HAVEN, FL 33880 US

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: VICTOR A VIGO, JR

01/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VIGO, VICTOR JR
Address: PO BOX 1223
City-St-Zip: WINTER HAVEN, FL 33882

Title: MGR () Delete
Name: VIGO, KELLE
Address: PO BOX 1223
City-St-Zip: WINTER HAVEN, FL 33882

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VIGO, VICTOR A JR
Address: PO BOX 1223
City-St-Zip: WINTER HAVEN, FL 33882

Title: MGR (X) Change () Addition
Name: VIGO, KELLE L
Address: PO BOX 1223
City-St-Zip: WINTER HAVEN, FL 33882

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: KELLE L VIGO

MGR

01/17/2007

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