

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

1. Apr 11, 2008 8:00 am
Secretary of State

01-22-2008 90118 037 ***138.75

DOCUMENT # L07000002348			
1. Entity Name RAY KRIEGBAUM & ASSOCIATES, L.L.C.			
Principal Place of Business 3135 FORESTBROOK DR. NORTH LAKELAND, FL 33811		Mailing Address 3135 FORESTBROOK DR. NORTH LAKELAND, FL 33811	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
8. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KRIEGBAUM, RAYMOND P 3135 FORESTBROOK DR. NORTH LAKELAND, FL 33811		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
5. 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 <u>Raymond P. Kieglbaum</u>		DATE <u>1/16/08</u>	
Signature typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when re-registering)	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KRIEGBAUM, RAYMOND P 3135 FORESTBROOK DR. NORTH LAKELAND, FL 33811 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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: <u>Raymond P. Kieglbaum</u>		DATE <u>1/16/08</u> 863-248-1199	
Signature AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	