

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000011651

FILED
Jul 15, 2008
Secretary of State

Entity Name: KING BRANDS WAREHOUSE LLC

Current Principal Place of Business:

9910 BAVARIA ROAD
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

9910 BAVARIA ROAD
FORT MYERS, FL 33913

New Mailing Address:

FEI Number: 20-4704142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KING, JOHN
9910 BAVARIA ROAD
FORT MYERS, FL 33913 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KING, JASON
Address: 5893 FORESTAL AVENUE
City-St-Zip: WATERFORD, MI 48327

Title: MGRM () Delete
Name: KING, JEFF
Address: 3820 NE 28TH AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGRM () Delete
Name: KING, JOHN
Address: 15335 MERION COURT
City-St-Zip: NORTHVILLE, MI 48167

ADDITIONS/CHANGES:

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

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: JOHN KING

MEMB

07/15/2008

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