

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000015354

Entity Name: K9 LOG OPS LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3308 NEEDLE PALM DRIVE  
EDGEWATER, FL 32141 US

**New Principal Place of Business:**

**Current Mailing Address:**

3308 NEEDLE PALM DRIVE  
EDGEWATER, FL 32141 US

**New Mailing Address:**

FEI Number: 20-8497139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LYBRAND, CYNTHIA M  
728 CANAL STREET  
NEW SMYRNA BEACH, FL 321686903 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  
Name: LOWE, SHARON A  
Address: 3308 NEEDLE PALM DRIVE  
City-St-Zip: EDGEWATER, FL 32141 US

Title: CEO  
Name: LOWE, RODGER D  
Address: 3308 NEEDLE PALM DRIVE  
City-St-Zip: EDGEWATER, FL 32141 US

I hereby 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: SHARON A LOWE

MGRM

04/28/2011

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