

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033298

**FILED**  
**Apr 04, 2008**  
**Secretary of State**

**Entity Name:** K&W SERVICES LLC

**Current Principal Place of Business:**

812 BLOSSOM DRIVE  
FORT WALTON BEACH, FL 32547 US

**New Principal Place of Business:**

134 GARNETT BAYOU  
SANTA ROSA BEACH, FL 32459 US

**Current Mailing Address:**

812 BLOSSOM DRIVE  
FORT WALTON BEACH, FL 32547 US

**New Mailing Address:**

134 GARNETT BAYOU  
SANTA ROSA BEACH, FL 32459 US

**FEI Number:** 26-1684183

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, KATHLEEN M  
812 BLOSSOM DRIVE  
FORT WALTON BEACH, FL 32547 US

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

WILLIAMS, KATHLEEN M  
134 GARNETT BAYOU  
SANTA ROSA BEACH, FL 32459 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: \_\_\_\_\_

04/04/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILLIAMS, KATHLEEN M  
Address: 812 BLOSSOM DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: MGR ( ) Delete  
Name: MULLINS, WADE H  
Address: 812 BLOSSOM DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WILLIAMS, KATHLEEN M  
Address: 134 GARNETT BAYOU  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: MGR (X) Change ( ) Addition  
Name: MULLINS, WADE H  
Address: 134 GARNETT BAYOU  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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: KATHLEEN M WILLIAMS

MGRM

04/04/2008

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