

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-04-2008 90103 020 ***138.75

DOCUMENT # L07000038925
1. Entity Name
KK HOLDINGS TWO, LLC



Principal Place of Business Mailing Address
138 PINE TREE DRIVE 138 PINE TREE DRIVE
DEBARY FL 32713 DEBARY FL 32713

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

00004000



1st MOORE CR2E083 (10/07)

20-8844196
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
KUEHNE, KATHLEEN
138 PINE TREE DRIVE
DEBARY FL 32713
7. Name and Address of New Registered Agent
Name KATHLEEN KUEHNE
Street Address (P.O. Box Number is Not Acceptable)
138 PINE TREE DR
City DEBARY FL Zip Code 32713

8. 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 Kathleen Kuehne DATE 2-4-08
(NOTE: Registered agent signature required when 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	PRESIDENT KATHLEEN KUEHNE 138 PINE TREE DR DEBARY FL 32713 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ 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 Section 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: Kathleen Kuehne DATE 2-4-08 386 668 7866
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Expiration