

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066034

Entity Name: K AND L ENTERPRISE, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

5512 CYPRESS LINKS BOULEVARD
ELKTON, FL 32033

New Principal Place of Business:

Current Mailing Address:

5512 CYPRESS LINKS BOULEVARD
ELKTON, FL 32033

New Mailing Address:

FEI Number: 26-3150313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, KEITH E
5512 CYPRESS LINKS BOULEVARD
ELKTON, FL 32033 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: MGR () Delete
Name: BAILEY, KEITH E
Address: 5512 CYPRESS LINKS BOULEVARD
City-St-Zip: ELKTON, FL 32033

Title: MGR () Delete
Name: POLLA, LOULANE J
Address: 5512 CYPRESS LINKS BOULEVARD
City-St-Zip: ELKTON, FL 32033

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: AUSTIN, LORIN W
Address: 110 RIBERIA STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

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: KEITH E. BAILEY

MGR

04/17/2009

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