

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087707

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: K & D BUILDING CONSTRUCTION, LLC

**Current Principal Place of Business:**

1750 DOBBS RD.  
ST AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

**Current Mailing Address:**

1750 DOBBS RD.  
ST AUGUSTINE, FL 32084 US

**New Mailing Address:**

FEI Number: 26-0785788

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DORN, THOMAS C  
1750 DOBBS RD.  
ST AUGUSTINE, FL 32084 US

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

DORN, MELINDA  
1750 DOBBS RD.  
ST AUGUSTINE, FL 32084 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: MELINDA DORN

04/29/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DORN, THOMAS C  
Address: 8278 A1A SOUTH  
City-St-Zip: ST AUGUSTINE, FL 32080 US

Title: MGR ( ) Delete  
Name: KEMP, RAYMOND K  
Address: 700 WEST POPE RD, #L89  
City-St-Zip: ST AUGUSTINE, FL 32080 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DORN, THOMAS C  
Address: 1750 DOBBS ROAD  
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: MGR (X) Change ( ) Addition  
Name: DORN, MELINDA  
Address: 1750 DOBBS ROAD  
City-St-Zip: ST AUGUSTINE, FL 32084 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: MELINDA DORN

MGR

04/29/2008

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