2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# L07000087944

Entity Name: KK & L HOLDINGS, LLC

Current Principal Place of Business:

5480 NORTH OCEAN DRIVE
UNIT A-9D
SINGER ISLAND, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

5480 NORTH OCEAN DRIVE
UNIT A-9D
SINGER ISLAND, FL 33404 US

New Mailing Address:

FEI Number: 26-0818134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAUERBERG, ERIC M
200 VILLAGE SQUARE CROSSING
SUITE 102
PALM BEACH GARDENS, FL 33410 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: LEHMAN, JEFFREY
Address: 5480 NORTH OCEAN DRIVE, UNIT A-9D
City-St-Zip: SINGER ISLAND, FL 33404 US

Title: MGR ( ) Delete
Name: KEENER, JAMES
Address: 2676 SW SUNNYFIELD TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: MGR ( ) Delete
Name: KEENER, ELIZABETH
Address: 2676 SW SUNNYFIELD TRAIL
City-St-Zip: PALM CITY, FL 34990 US

ADDITIONS/CHANGES:

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

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

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

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: JEFFREY LEHMAN MNG 02/26/2009

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