

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000101511

FILED  
May 06, 2008  
Secretary of State

Entity Name: KLK HOME ENTERPRISES, LLC

**Current Principal Place of Business:**

2001 ORANGE PICKER ROAD  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

2001 ORANGE PICKER ROAD  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

BRANT, ABRAHAM, REITER, MCCORMICK & GREENE  
50 N. LAURA STREET SUITE 2750  
JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: ELLISON, KERI L  
Address: 2001 ORANGE PICKER RD  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP ( ) Change (X) Addition  
Name: FRISCH, E. KARL  
Address: 2001 ORANGE PICKER RD  
City-St-Zip: JACKSONVILLE, FL 32223 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: KERI ELLISON

PRES

05/06/2008

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