


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 12, 2008 8:00 am
Secretary of State

08-12-2008 90005 027 ***143.75

DOCUMENT # L07000108759	
1. Entity Name KDIBS, LLC	

Principal Place of Business 6609 WATERFORD LANE SARASOTA, FL 34238	Mailing Address 6609 WATERFORD LANE SARASOTA, FL 34238
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00009353

2. Principal Place of Business - No P.O. Box # 6609 Waterford Lane Suite, Apt. #, etc.	3. Mailing Address 6609 Waterford Lane Suite, Apt. #, etc.
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08072008 Chg-LLC CR2E083 (12/06)


City & State Sarasota, FL	City & State Sarasota, FL
Zip 34238	Zip 34238
Country	Country

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent DIBNER, KENNETH J 6609 WATERFORD LANE SARASOTA, FL 34238	
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7. Name and Address of New Registered Agent Name Kenneth J. Dibner Street Address (P.O. Box Number is Not Acceptable) 6609 Waterford Lane City Sarasota FL Zip Code 34238	
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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 	DATE 8/7/08

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DIBNER, KEN J 6609 WATERFORD LANE SARASOTA, FL 34238 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: 	DATE: 8/7/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	

Woodcraft

150 Boston Post Road
Orange, CT 06477

ATTACHMENT

50009353

Invoice

Date	Invoice #
8/4/2008	67538

Bill To
Woodcraft Sarasota attn: Ken Dibner 4456 Bee Ridge Road Sarasota, FL 34233

P.O. No.	Terms	Project
	Net 30, 60, 90, 120	

Quantity	Description	Rate	Amount
	INVENTORY TRANSFER	23,000.00	23,000.00
	Sales Tax Received	6.00%	0.00
Printed from Web page on 8/7/08 \$143.75			
Total			\$23,000.00