

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030212

FILED
Apr 30, 2009
Secretary of State

Entity Name: K&E MANAGEMENT GROUP, LLC

Current Principal Place of Business:

9124 NW 38TH PLACE
SUNRISE, FL 33351

New Principal Place of Business:

2578 LONG SANDY CIRCLE
MERRITT ISLAND, FL 32952

Current Mailing Address:

9124 NW 38TH PLACE
SUNRISE, FL 33351

New Mailing Address:

2578 LONG SANDY CIRCLE
MERRITT ISLAND, FL 32952

FEI Number: 26-2246700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREER, ERIC J
9124 NW 38TH PLACE
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

FREER, KATHLEEN M
2578 LONG SANDY CIRCLE
MERRITT ISLAND, FL 32952 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: KATHLEEN M FREER

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FREER, ERIC J
Address: 9124 NW 38TH PLACE
City-St-Zip: SUNRISE, FL 33351

Title: MGR (X) Delete
Name: BARNA, KATHLEEN M
Address: 9124 NW 38TH PLACE
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FREER, KATHLEEN M
Address: 2578 LONG SANDY CIRCLE
City-St-Zip: MERRITT ISLAND, FL 32952

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: KATHLEEN M FREER

MGR

04/30/2009

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