

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000059978

FILED
Aug 04, 2009
Secretary of State**Entity Name:** KJ & BW ENTERPRISES, LLC**Current Principal Place of Business:**4419 66TH STREET NORTH
KENNETH CITY, FL 33779 US**New Principal Place of Business:**4419 66TH STREET NORTH
KENNETH CITY, FL 33709 US**Current Mailing Address:**4419 66TH STREET NORTH
KENNETH CITY, FL 33779 US**New Mailing Address:**4419 66TH STREET NORTH
KENNETH CITY, FL 33709 US**FEI Number:** 26-2830540**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JONES, WAYNE
8839 MERRIOMOR BLVD E
LARGO, FL 33777 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: MGRM () Delete
Name: FRAY, JANET
Address: 307 62ND AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33702 USTitle: MGRM () Delete
Name: JONES, KATHY
Address: 8839 MERRIMOR BLVD E
City-St-Zip: LARGO, FL 33777 USTitle: MGRM () Delete
Name: JONES, WAYNE
Address: 8839 MERRIOMOR BLVD E
City-St-Zip: LARGO, FL 33777 USTitle: MGRM () Delete
Name: FRAY, WILLIAM
Address: 307 62ND AVE N.
City-St-Zip: ST. PETERSBURG, FL 33702 US**ADDITIONS/CHANGES:**Title: MGR (X) Change () Addition
Name: FRAY, JANET
Address: 6432 BONNIE BAY CIRCLE NORTH
City-St-Zip: PINELLAS PARK, FL 33781 USTitle: MGR (X) Change () Addition
Name: JONES, KATHY
Address: 8839 MERRIMOR BLVD E
City-St-Zip: LARGO, FL 33777 USTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: MGRM (X) Change () Addition
Name: FRAY, WILLIAM
Address: 6432 BONNIE BAY CIRCLE
City-St-Zip: PINELLAS PARK, FL 33781 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: WAYNE JONES

MGRM

08/04/2009

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