

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000114264

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** K AND A VENTURES OF NAVARRE LLC

**Current Principal Place of Business:**

2495 HWY. 87S  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

**Current Mailing Address:**

2495 HWY. 87S  
NAVARRE, FL 32566 US

**New Mailing Address:**

**FEI Number:** 27-3852243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALFORD, STEPHEN  
2495 HWY 87S  
NAVARRE, FL 32566 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  
**Name:** ALFORD, STEPHEN  
**Address:** 2495 HWY. 87S  
**City-St-Zip:** NAVARRE, FL 32566 US

**Title:** MGR  
**Name:** ALFORD, SONYA  
**Address:** 2495 HWY. 87S  
**City-St-Zip:** NAVARRE, FL 32566 US

**Title:** MGR  
**Name:** KING, LONNIE  
**Address:** 2495 HWY. 87S  
**City-St-Zip:** NAVARRE, FL 32566 US

**Title:** MGR  
**Name:** KING, GLORIA A  
**Address:** 2495 HWY. 87S  
**City-St-Zip:** NAVARRE, FL 32566 US

I hereby 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:** LONNIE KING

MGR

04/13/2012

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