


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 20, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000002473 1. Entity Name KS CONSULTING, L.L.C.	
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Principal Place of Business 625 TENNYSON ROCHESTER HILLS, MI 48307	Mailing Address 625 TENNYSON ROCHESTER HILLS, MI 48307
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DO NOT WRITE IN THIS SPACE



07012004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 38-3627416	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SNYDER, SUSAN K 625 TENNYSON ROCHESTER HILLS, MI 48307
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Susan K. Snyder* **7/1/04** **(248) 853-5075**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #