

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000026

Entity Name: KERN-COLEMAN & CO., LLC

FILED
Jan 13, 2006
Secretary of State

Current Principal Place of Business:

7 MALL COURT
SAVANNAH, GA 31406

New Principal Place of Business:

Current Mailing Address:

7 MALL COURT
SAVANNAH, GA 31406

New Mailing Address:

FEI Number: 01-1281034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERN, BERNICE I
1725 BIRMINGHAM STREET
HOLLY HILL, FL 32117 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: KERN, JOHN S P.E
Address: P.O. BOX 15179
City-St-Zip: SAVANNAH, GA 31416

Title: MGRM () Delete
Name: COLEMAN, TERRY M
Address: P.O. BOX 15179
City-St-Zip: SAVANNAH, GA 31416

Title: MGRM () Delete
Name: OLSON, TOM
Address: P.O. BOX 15179
City-St-Zip: SAVANNAH, GA 31416

Title: MGRM () Delete
Name: CRAPPS, MARK
Address: P.O. BOX 15179
City-St-Zip: SAVANNAH, GA 31416

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KAY J JONES

MGR

01/13/2006

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