

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006854

FILED
Mar 06, 2006
Secretary of State

Entity Name: JK SPORT FISHING SERVICES, LLC

Current Principal Place of Business:

3003 BREEZEWOOD LANE
NEENAH, WI 54957

New Principal Place of Business:

3003 W. BREEZEWOOD LANE
P.O. BOX 368
NEENAH, WI 54957 US

Current Mailing Address:

3003 BREEZEWOOD LANE
NEENAH, WI 54957

New Mailing Address:

3003 W. BREEZEWOOD LANE
P.O. BOX 368
NEENAH, WI 54957 US

FEI Number: 26-0124522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOSIBA, JEFF
371 CROTON AVENUE
GRASSY KEY, FL 33050 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: KELLER, JAMES J
Address: 3003 W. BREEZEWOOD LANE
City-St-Zip: NEENAH, WI 54957

Title: MGRM () Delete
Name: KOSIBA, JEFF
Address: 371 CROTON AVENUE
City-St-Zip: GRASSY KEY, FL 33050

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KELLER, JAMES J
Address: 3003 W. BREEZEWOOD LANE
City-St-Zip: NEENAH, WI 54957 US

Title: MEM (X) Change () Addition
Name: KOSIBA, JEFF
Address: 371 CROTON AVENUE
City-St-Zip: GRASSY KEY, FL 33050 US

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: JAMES J. KELLER

MGRM

03/06/2006

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