

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000102989

**Entity Name:** KGNV SALES, LLC

**Current Principal Place of Business:**

4201 NW 95TH BLVD.  
GAINESVILLE, FL 32606

**Current Mailing Address:**

POST OFFICE BOX 12008  
GAINESVILLE, FL 32604

**FEI Number:** 45-3211740

**Certificate of Status Desired:** No

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

GLEIM, LAWRENCE A  
4201 NW 95TH BLVD.  
GAINESVILLE, FL 32606 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name GLEIM, LAWRENCE  
Address 4201 NW 95TH BLVD.  
City-State-Zip: GAINESVILLE FL 32606

Title MGR  
Name GLEIM, GARRETT W  
Address 4201 NW 95TH BLVD.  
City-State-Zip: GAINESVILLE FL 32606

Title MGR  
Name GLEIM, LORIE M  
Address 4201 NW 95TH BLVD.  
City-State-Zip: GAINESVILLE FL 32606

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAWRENCE GLEIM

**MANAGER**

**02/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date