

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 APR 22 AM 10:39

<b>DOCUMENT # A00000001072</b> 1. Entity Name KBCB FAMILY LIMITED PARTNERSHIP, LTD.			
Principal Place of Business 405 SW ATLANTIC DRIVE LANTANA, FL 33462		Mailing Address 405 SW ATLANTIC DRIVE LANTANA, FL 33462	
2. Principal Place of Business - No P.O. Box # 270 South County Road Suite, Apt. #, etc.		3. Mailing Address 270 South County Road Suite, Apt. #, etc.	
City & State Palm Beach, FL		City & State Palm Beach, FL	
Zip 33480	Country	Zip 33480	Country
4. FEI Number 65-1018435		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  BROWN, KENNETH W 405 SW ATLANTIC DRIVE LANTANA, FL 33462		7. Name and Address of New Registered Agent Name Doris Shaw Street Address (P.O. Box Number is Not Acceptable)  270 South County Road City Palm Beach FL Zip Code 33480	
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 <u>Doris Shaw</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>3/26/08</u>	
<b>FILE NOW!!! FEE IS \$500.00</b> <b>After May 1, 2008, Fee will be \$900.00</b>			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>			
<b>12. GENERAL PARTNER INFORMATION</b>		<b>13. ADDRESS CHANGES ONLY</b>	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P00000062148 KBCB MANAGEMENT, INC. 405 SW ATLANTIC DRIVE LANTANA, FL 33462	STREET ADDRESS CITY-ST-ZIP	270 South County Road Palm Beach, FL 33480
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE: <u>Wendy Brown</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		DATE <u>3/26/08</u> <small>Daytime Phone #</small>	

STAPLE CHECK HERE