

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90015 050 ****50.00

DOCUMENT # L00000006015

1. Entity Name
KWGC INVESTMENT CO., L.L.C.



Principal Place of Business
1010 KENNEDY DR
KEY WEST, FL 33040

Mailing Address
60 GOLF CLUB DRIVE
KEY WEST, FL 33040

24052001



2. Principal Place of Business
6805 OVERSEAS HWY.
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 501267
Suite, Apt. #, etc.

04072004 Chg-LLC CR2E083 (10/03)

City & State
MARATHON, FL
Zip 33050 Country

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MARATHON, FL
Zip 33050 Country

4. FEI Number
65-1024453
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ALLISON, JOHN R III
100 SE 2ND STREET, SUITE 3350
MIAMI, FL 33131-2151

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
6803 OVERSEAS HIGHWAY
City MARATHON FL Zip Code 33050

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 reinstating) DATE _____

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SINGH, PRITAM 1010 KENNEDY DR KEY WEST, FL 33040	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR/P 6805 OVERSEAS HIGHWAY MARATHON, FL 33050	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REYNOLDS, TYLER 6805 OVERSEAS HIGHWAY MARATHON, FL 33050	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAGEL, NANCY 6805 OVERSEAS HIGHWAY MARATHON, FL 33050	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T ROBERTS, JENNIFER 6805 OVERSEAS HIGHWAY MARATHON FL 33050	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Jennifer Roberts Jennifer Roberts 4-19-04 305-296-5601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #