2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L00000012167

1. Entity Name
KB PROPERTIES, LLC

Principal Place of Business	Mailing Address
1036 S. FLORIDA AVENUE LAKELAND, FL 33803	1036 S. FLORIDA AVENUE LAKELAND, FL 33803

DO NOT WRITE IN THIS SPACE

03102007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number 59-3678052	Applied For
	Not Applicable

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

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6. Name and Address of Current Registered Agent

HUNNICUTT, C. KEITH
1036 S. FLORIDA AVENUE
LAKELAND, FL 33803

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	HUNNICUTT, C. KEITH
STREET ADDRESS	1825 OLEANDER DR
CITY-ST-ZIP	AVON PARK, FL 33825
TITLE	MGRM
NAME	MUNDY, BENJAMIN F JR
STREET ADDRESS	141 WEST PALM DRIVE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 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: _____   3/10/07   863-688-8882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #