


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000021201 1. Entity Name KW PROPERTIES, LLC	
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Principal Place of Business 5551 RIDGEWOOD DR STE 501 NAPLES, FL 34108	Mailing Address C/O DAVID G BUDD 5551 RIDGEWOOD DR STE 501 NAPLES, FL 34108
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DO NOT WRITE IN THIS SPACE



04252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 04-3589297	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BUDD, DAVID G 5551 RIDGEWOOD DR STE 501 NAPLES, FL 34108

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000937392
05/27/08-80048-016 143.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRT STARMAN, SHELDON W 4099 TAMiami TRAIL NORTH, SUITE 400 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRS BUDD, DAVID G 5551 RIDGEWOOD DR STE 501 NAPLES, FL 34108
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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: David G Budd 4-25-08 239514-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

DAVID G BUDD, Secretary