2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # L02000002163 1. Entity Name KBD REALTY 60., L.L.C. Principal Place of Business Mailing Address 25 FOXCROFT DR. 25 FOXCROFT DR. MARLBORO, NJ 07746 MARLBORO, NJ 07746 CR2E083 (10/03) 04222005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 26-0051281 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 5. 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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 9 MANAGING MEMBERS/MANAGERS TITLE n NALUM, KENNETH NAME 25 FOXCROFT DR STREET ADDRESS CITY-ST-ZIP MARLBORO, NJ 07746 000000344472 04/29/05-80137-017 50.00 TITLE n WALSH, ANN NAME 25 FOXCROFT DR STREET ADDRESS MARLBORO, NJ 07746 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 sha 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 of execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE