2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000028184

1. Entity Name
KIRBO PROPERTIES, L.L.C.

Principal Place of Business	Mailing Address
2030 FLEISCHMANN ROAD TALLAHASSEE, FL 32308	2030 FLEISCHMANN ROAD TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number		Applied For
20-0009252		Not Applicable
5. Certificate of Status Desired	☑	**$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

REID, VICTORIA
2030 FLEISCHMANN RD.
TALLAHASSEE, FL 32308

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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 _Victoria Reid Administrator /victoria Reid_   _1/7/08_
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75 _+ 5.00 = $143.75_
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	REID, VICTORIA
STREET ADDRESS	2030 FLEISCHMANN RD.
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
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CITY-ST-ZIP	

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01/17/08-80041-018 143.75

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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: _Victoria Reid Administrator /Victoria Reid_ _1/08_ _219.2___
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #