## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040660

Entity Name: KCW, LLC

FILED Jan 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19154 BRANSONS WAY 39030 ROSE STREET UMATILLA, FL 32784 UMATILLA, FL 32784

Current Mailing Address: New Mailing Address:

PO BOX 2485 UMATILLA, FL 32784

FEI Number: 20-0333674 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLLEEN, WALLACE OWNER

19154 BRANSONS WAY

19154 BRANSONS WAY

39030 ROSE STREET

UMATILLA, FL 32784 US

UMATILLA, FL 32784 US

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.

SIGNATURE: COLLEEN WALLACE 01/07/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Title:
 MGR
 ( ) Delete
 Title:
 MGR
 ( X) Change ( ) Addition

 Name:
 WALLACE, COLLEEN OWNER
 Name:
 WALLACE, COLLEEN OWNER

 Address:
 19154 BRANSONS WAY
 Address:
 39030 ROSE STREET

 City-St-Zip:
 UMATILLA, FL 32784
 City-St-Zip:
 UMATILLA, FL 32784

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: WALLACE, KENNETH R Name: WALLACE, KENNETH R Address: 19154 BRANSONS WAY Address: 39030 ROSE STREET City-St-Zip: UMATILLA, FL 32784 City-St-Zip: UMATILLA, FL 32784

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: COLLEEN WALLACE MGR 01/07/2008