

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012296

Entity Name: KIWI PROPERTIES LLC

FILED
Apr 15, 2008
Secretary of State

Current Principal Place of Business:

4020 S ATLANTIC AVE
WILBUR BY THE SEA, FL 32127 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7308
DAYTONA BEACH, FL 32116

New Mailing Address:

FEI Number: 20-0729435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDERVEER, WILLIAM
4020 S ATLANTIC AVE
WILBUR BY THE SEA, FL 32116 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VANDERVEER, WILLIAM
Address: 4120 S ATLANTIC AVE
City-St-Zip: WILBUR BY THE SEA, FL 32127

Title: MGR () Delete
Name: VANDERVEER, WILLIAM G
Address: 4120 S ATLANTIC AVE
City-St-Zip: WILBUR BY THE SEA, FL 32127

Title: MGR () Delete
Name: GRAHAM, ASHLEY
Address: 1638 WESTERN RD
City-St-Zip: SOUTH DAYTONA, FL 32119

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: STEFANIC, ANNE
Address: 725 MAGNOLIA AVE
City-St-Zip: HOLLY HILL, FL 32117

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: WILLIAM VANDERVEER

P

04/15/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date