## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED May 01, 2006 08:00 Al Secretary of State

DOCUMENT # L0400051380  1. Entity Name KRW MOB-A, LLC			Secretary of State		
1 '	ce of Business FIELD AVENUE FL 34243	Mailing Address 2040 WHITFIELD AVENUE SARASOTA, FL 34243		T TO THE REPORT OF THE PERSON AND TH	
r	OO NOT WRITI	IN THIS SDA	CE	04252006 No Chg-LLC	CR2E083 (11/05)
L	DO NOT WRITE	E, IIV., I MIO JOPA	CE	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
				5. Certificate of Status Desired	55.00 Additional Fee Required
	6. Name and Address of Curren	f Registered Agent			
MIDDLEBROOKS, J. HUGH 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236			DO NOT WRITE IN THIS SPACE		
	e named entity submits this statement it tions of registered agent.  Signature, typed or printed name of registered agen				rida, 1 am familiar with, and accept
F D	iling Fee is \$50.00 ue by May 1, 2006	i and the nepproduce, Profits Tragistis	ed Agent signature required	พ.เขา (เขาเรเลขา รู)	שאוב
9.	MANAGING MEMB	ERS/MANAGERS	<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSKAMP, ROBERT G 2040 WHITFIELD AVENUE SARASOTA, FL 34243	a io, minimacija			0550395
TITLE NAME STREET ADDRESS CITY-SI-ZIP			-	05/13/08-	-20052-003 <b>50.</b> 00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT W	RITE
TITLE				IN THIS SP	ACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Fiorida 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 employee to execute this report as required by Chapter 608, Florida Statutes.

Date

Daytime Phone #

SIGNATURE: 11-755.0302

SIGNATURE AND THE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR ALITHORIZED REPRESENTATIVE

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