## **2008 LIMITED LIABILITY COMPANY**

**FILED** Apr 29, 2008 08:00 AN Secretary of State

ANNUAL REPORT	
DOCUMENT # L05000045697	
4 E	

KESWICK PROPERTIES LLC



Principal Place of Business

700 ELEVENTH STREET S. PH 2 NAPLES, FL 34102

Mailing Address 4710 15TH AVE NAPLES, FL 34116



DO NOT WRITE IN THIS SPACE

CR2E083 (12/07) 03102008 No Chg-LLC

4. FEI Number Applied For 56-2513862 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 

Fee Required

6. Name and Address of Current Registered Agent

MORRISON, CANDACE B 4710 15TH AVE S.W. NAPLES, FL 34116

## DO NOT WRITE IN THIS SPACE

the obligat	named entity submits this statement for the purpose of char ions of registered agent	iging its registered office or registered agent, or boll	h, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	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 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS		#59000932223	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FICUS GROUP LLC 85 SEVENTH STREET SOUTH NAPLES, FL 34102		05/22/08-80046-013 138.75	
TITLE NAME STREET ADD LESS CITY-ST-ZIP		*		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY ST-ZIP		i IN 7	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

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 the report as required by Chapter 608, Florida Statutes.