

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT.**

FILED
Mar 27, 2007 8:00 am
Secretary of State

03-27-2007 90205 026 ****55.00

DOCUMENT # L05000092114

1. Entity Name
CAPE KMP HOLDINGS, LLC



Principal Place of Business
**5313 SW 8TH
CAPE CORAL, FL 33914 US**

Mailing Address
**5313 SW 8TH
CAPE CORAL, FL 33914 US**

60023043



03022007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3574329	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**KEOUGH, KEVIN
5313 SW 8TH
CAPE CORAL, FL 33914**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KEOUGH, KEVIN <i>13359 S. AVE O.</i> 5313 SW 8TH CAPE CORAL, FL 33914 <i>Chicago IL 60633</i>
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**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #