## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000021971

1. Entity Name
KW CONSULTING, LLC



FILED Jan 28, 2008 08:00 AM Secretary of State

Principal Place of Business

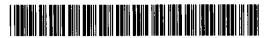
Mailing Address

7620 S FLAGLER DRIVE

WEST PALM BEACH, FL 33405

PO BOX 1749

WEST PALM BEACH, FL 33402



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For
20-4463913	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

WATSON, KARL H 7620 SOUTH FLAGLER DR WEST PALM BEACH, FL 33405

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	named entity submits this statement for the purpose of chan ions of registered agent.	iging its registered office or registered agent, or bo	oth, 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	
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WATSON, KARL H 7620 S FLAGLER DRIVE WEST PALM BEACH, FL 33405		Hannananaoot	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000800325 01/31/08-80012-025 138.75	
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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 timited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.				

E AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE