2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State
02-21-2007 90104 004 ****55.00

DOCUMENT # L06000098738

1. Entity Name

KAWAGRA GROVES, LLC

Principal Place of Business	Mailing Address
2604 BAY DRIVE BRADENTON FL 34207	2604 BAY DRIVE BRADENTON FL 34207

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E083 (10/06)

4. FEI Number: 02-0803099 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BEIMBORN, THOMAS J 2604 BAY DRIVE BRADENTON FL 34207	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE MGRM NAME BEIMBORN, THOMAS J. STREET ADDRESS 2604 BAY DRIVE CITY-ST-ZIP BRADENTON, FL 34207	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Thomas J. Beimborn 2-11-2007 941-727-4054
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #