2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 29, 2008 08:00 AM Secretary of State DOCUMENT # M00000000972 1. Entity Name KELCO/FB OCEAN POINT LLC Principal Place of Business Mailing Address 810 SEVENTH AVENUE, 28TH FLOOR 810 SEVENTH AVENUE, 28TH FLOOR NEW YORK, NY 10019 NEW YORK, NY 10019 04242008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0999407 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AGRAN, MARJORIE DO NOT WRITE 119 B PALM POINT CIR PALM BEACH GARDENS, FL 33418 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U00000932504 FILE NOW!!! FEE IS \$138.75 05/22/08-80058-013 138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME KELCO/ER LLC STREET ADDRESS 810 SEVENTH AVE. 28TH FLOOR CITY-ST-ZIP NEW YORK, NY 10019 THILE NAME STREET ADDRESS CITY - ST - 7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME

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 fliability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes

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

> SIGNATURE AND TYPED OR PRINTED NA E OF SIGNING MANAGING MBER, OR AUTHORIZED REPRESENTATIVE

FILED