# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 27, 2004**
**Secretary of State**

DOCUMENT# P03039

**Entity Name:** KENNEDY-WILSON FLORIDA MANAGEMENT INC.

**Current Principal Place of Business:**

900 N. MICHIGAN AVE
SUITE 1200
CHICAGO, IL 60611

**New Principal Place of Business:**

900 N. MICHIGAN AVE
SUITE 1120
CHICAGO, IL 60611

**Current Mailing Address:**

900 N. MICHIGAN AVE
SUITE 1200
CHICAGO, IL 60611

**New Mailing Address:**

900 N. MICHIGAN AVE
SUITE 1120
CHICAGO, IL 60611

**FEI Number: 36-3322592** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PARACORP INCORPORATED
236 EAST 6TH AVE.
TALLAHASSEE, FL 32303 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: MCMORROW, WILLIAM J
Address: 9601 WILSHIRE BLVD
City-St-Zip: BEVERLY HILLS, CA 90210

Title: SMD ( ) Delete
Name: BEASLEY, LARRY
Address: 900 N MICHIGAN AVENUE
City-St-Zip: CHICAGO, IL 60611

Title: P ( ) Delete
Name: ROSTEN, JAMES
Address: 9601 WILSHIRE #220
City-St-Zip: BEVERLY HILLS, CA 90210

Title: TD ( ) Delete
Name: LYLE, FREEMAN
Address: 9601 WILSHIRE #220
City-St-Zip: BEVERLY HILLS, CA 90210

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: STARR, PATRICIA L
Address: 4085 PINE RIDGE LANE
City-St-Zip: WESTON, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY BEASLEY SMD 05/27/2004

Electronic Signature of Signing Officer or Director — Date