

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050158

**FILED**  
**Apr 17, 2008**  
**Secretary of State**

**Entity Name:** KATSUR AT WESTERN KENTUCKY, LLC

**Current Principal Place of Business:**

176 S. SHADOW BAY BLVD  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

176 S. SHADOW BAY BLVD  
LONGWOOD, FL 32750

**New Mailing Address:**

FEI Number: 20-1360458

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STONE, STEPHEN M  
725 N MAGNOLIA AVE  
ORLANDO, FL 32803 US

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

KATSUR, JAMES T  
176 S. SHADOW BAY BLVD  
LONGWOOD, FL 32750 US

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: JAMES T KATSUR

04/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KATSUR MANAGEMENT GR, OUP, INC.  
Address: 926 GREAT POND DR., STE 2003  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES T KATSUR

MGR

04/17/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date