

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000050158

**FILED**  
**Mar 23, 2012**  
**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:**

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

**MANAGING MEMBERS/MANAGERS:**

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

I hereby 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

MGRM

03/23/2012

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