2006 LIMITED LIABILITY COMPANY - - ANNUAL REPORT

FILED Feb 27, 2006 08:00 AN Secretary of State

DOCUMENT#	L03000038420
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1. Entity Name KH INVESTMENTS, LLC



Principal Place of Business

SIGNATURE:

Mailing Address

3205 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082 3205 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082



DO NOT WRITE IN THIS SPACE

02232006 No Chg-LLC CR2E083 (11/05)

4. FEI Number			Applied For
68-056927	7		Not Applicable
5. Certificate of St	atus Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

RAYMOND L. HUTCHINS, CPA 3205 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082

DO NOT WRITE IN THIS SPACE

2/23/06

Daytime Phone #

8. The above the obligati	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or bol	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Fi Di	ling Fee Is \$50.00 ue by May 1, 2006			
S.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR HUTCHINS MANAGEMENT SERVICES, INC. 751 OAK STREET, SUITE 600 JACKSONVILLE, FL 32204			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1100000448716 03/09/05-60026-005 50.08	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET AUDRESS CITY-ST-ZIP				
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 liability company or the repeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.				

SIGNATURE AND TYPED OR ERINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE