## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L04000045803**

1. Entity Name KCH TAX CERTIFICATES - 10 LLC



FILED Apr 24, 2007 08:00 AM Secretary of State

Principal Place of Business

8960 BAY COLONY DR #502 NAPLES, FL 34108 Mailing Address

8960 BAY COLONY DR #502 NAPLES, FL 34108



04062007 No Chg-LLC

4-9-07

Octo

(419)-756-8166

Daytime Phone #

CR2E083 (11/05)

4. FEI Number			Applied For
20-1221532			Not Applicable
5. Certificate of Status D	esired 🔲	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

HURDLE, KATHLEEN 8960 BAY COLONY DR #502 NAPLES, FL 34108

## DO NOT WRITE 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_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstalting)  OATE	
Fi De	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	HURDLE, KATHLEEN C		
STREET ADDRESS	8960 BAY COLONY DR #502	Manaaaaaa	
CITY-ST-ZIP	NAPLES, FL 34108	U00000728399 05/07/07-80015-019 50.00	
TITLE		00/01/01/00020 020 00100	
NAME Street Address			
CITY-ST-ZIP			
TITLE NAME			
STREET ADDRESS		DO NOT WRITE	
CITY-ST-ZIP		DO NOT WRITE	
TITLE		IN THIS SPACE	
NAME		IN THIS SPACE	
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
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TITLE			
NAME		i	
STREET ADDRESS		İ	
CITY-ST-ZIP			
11. 1 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

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