

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 A
Secretary of State

DOCUMENT # L04000056218

1. Entity Name
KCRT, LLC



Principal Place of Business
5166 LANCEWOOD DRIVE
SARASOTA, FL 34232

Mailing Address
5166 LANCEWOOD DRIVE
SARASOTA, FL 34232



01072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
09-9221899

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TYSON, ROBERT S
5166 LANCEWOOD DRIVE
SARASOTA, FL 34232

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 reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
TYSON, ROBERT S
5166 LANCEWOOD DRIVE
SARASOTA, FL 34232

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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000000734630
01/28/08-80015-016 138.75

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IN THIS SPACE

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

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

Date

Daytime Phone #

Robert S. Tyson

1/22/08 941-371-3751