

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000076983**  
 1. Entity Name  
**KRAUS COMMERCIAL PROPERTY GROUP LLC**



Principal Place of Business      Mailing Address  
**214 CORSAIR ROAD**      **214 CORSAIR ROAD**  
**DUCK KEY, FL 33050 US**      **DUCK KEY, FL 33050 US**

**DO NOT WRITE IN THIS SPACE**



01142006No Chg-LLC      CR2E083 (11/05)

4. FEI Number      Applied For  
**20-1780700**      Not Applicable

5. Certificate of Status Desired       **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent  
**WRIGHT, THOMAS D**  
**9711 OVERSEAS HIGHWAY**  
**MARATHON, FL 33050**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KRAUS, GEORGE A JR.
STREET ADDRESS	214 CORSAIR ROAD
CITY-ST-ZIP	DUCK KEY, FL 33050
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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CITY-ST-ZIP	

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**DO NOT WRITE 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:**       **1-16-06 305-289-2274**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Day/In Phone #