2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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DOCUMENT # L04000082774

 Entity Name KRG/CCA ESTERO, LLC



Mar 16, 2006 08:00 AM **Secretary of State**

Principal Place of Business

30 S. MERIDIAN **SUITE 1100** INDIANAPOLIS, IN 46204 Mailing Address

30 S. MERIDIAN SUITE 1100 INDIANAPOLIS, IN 46204



FILED

03132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1881864

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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| | ove named entity submits this statement for the purpose of cha gations of registered agent. | anging its registered office or registered agent, or both, in the S | state of Florida. I am familiar with, and accept |
|----------|--|---|--|
| SIGNATUR | Signature, typed or printed name of registered agent and title it applicable. | (NOTE: Registered Agent signature required when reinstating) | DATE |
| | Filing Fee is \$50.00 Due by May 1, 2006 | | |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE | MGRM | i | |

KRG ESTERO, LLC NAME 30 S. MERIDIAN, SUITE 1100 STREET ADDRESS CITY-ST-ZIP INDIANAPOLIS, IN 46204 MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

UUUUUU469701 93/27/06-8001B-013 50.00

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

SIGNATURE:

7/7/5 NAME STREET ADDRESS CITY-ST-ZIP

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

3/13/06