2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L05000088575

1. Entity Name

KRUCHTEN CAPITAL ENHANCEMENT. LLC



May 29, 2007 8:00 am Secretary of State 04-23-2007 90363 047 ****50.00

FILED

Principal Place of Business

Mailing Address

975 6TH AVENUE SOUTH-SUITE 200 NAPLES, FL 34102 US 975 6TH AVENUE SOUTH SUITE 200

NAPLES, FL 34102 US



04102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3413360

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KRUCHTEN, DEMIAN M 975 6TH AVENUE SOUTH SUITE 200 NAPLES, FL 34102

SIGNATURE:

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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.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KRUCHTEN, DEMIAN M 975 6TH AVENUE SOUTH, SUITE 200 NAPLES, FL 34102	· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KRUCHTEN, K P 975 6TH AVENUE SOUTH NAPLES, FL 34102		
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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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			