

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000001332

**FILED**  
**Apr 18, 2007**  
**Secretary of State**

**Entity Name:** KRATER & ASSOCIATES LLC

**Current Principal Place of Business:**

1109 DEL PRADO  
STE 15  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1109 DEL PRADO  
STE 15  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 65-0726889      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCMANUS, JAMES B  
1109 DEL PARADO BLVD.  
CAPE CORAL, FL 33990    US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      ( ) Delete  
**Name:** MCMANUS, JAMES B  
**Address:** 1109 DEL PRADO BLVD.  
**City-St-Zip:** CAPE CORAL, FL 33990

**ADDITIONS/CHANGES:**

**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES B MCMANUS      MGRM      04/18/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date