

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004596

FILED
Apr 29, 2009
Secretary of State

Entity Name: KR TIBURON HOLDINGS, LLC

Current Principal Place of Business:

2699 S. BAYSHORE DRIVE
SUITE 300
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2699 S. BAYSHORE DRIVE
SUITE 300
MIAMI, FL 33133

New Mailing Address:

FEI Number: 20-3512705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MICHELSON, GERALD A
2699 S. BAYSHORE DRIVE
SUITE 300
MIAMI, FL 33133 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: SHARKEY, KEITH S
Address: 2699 S. BAYSHORE DRIVE, SUITE 300
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM () Delete
Name: KAUFMAN, JAMES R
Address: 2699 S. BAYSHORE DRIVE, SUITE 300
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM () Delete
Name: MICHELSON, GERALD A
Address: 2699 S. BAYSHORE DRIVE, SUITE 300
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM () Delete
Name: HECKAMAN, BLAIN L
Address: 2699 S. BAYSHORE DRIVE, SUITE 300
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM () Delete
Name: DAVIS, STEVEN A
Address: 2699 S. BAYSHORE DRIVE, SUITE 300
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM () Delete
Name: DEMAR, STEVEN M
Address: 2699 S. BAYSHORE DRIVE, SUITE 300
City-St-Zip: MIAMI, FL 33133 US

ADDITIONS/CHANGES:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: GERALD MICHELSON

MGRM

04/29/2009

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