

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007072

FILED
Apr 15, 2008
Secretary of State

Entity Name: CRESCENT SEMINOLE LLC

Current Principal Place of Business:

400 SOUTH TRYON STREET, SUITE 1300
CHARLOTTE, NC 28285

New Principal Place of Business:

Current Mailing Address:

400 SOUTH TRYON STREET, SUITE 1300
CHARLOTTE, NC 28285

New Mailing Address:

FEI Number: 58-2558302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: CRESCENT RESOURCES L, LC
Address: 400 S TRYON ST., STE 1300
City-St-Zip: CHARLOTTE, NC 28285

Title: MGR () Delete
Name: F.F. SOUTH FLORIDA,, INC.
Address: 6001 VINLAND RD., STE 111
City-St-Zip: ORLANDO, FL 32819

Title: MGR () Delete
Name: RKALT LIMITED PARTNE, RSHIP
Address: 7600 DR PHILLIPS BLVD
City-St-Zip: ORLANDO, FL 32819

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:

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: DALE BARR

VP

04/15/2008

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