2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2008
Secretary of State

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Entity Name: CRT/MCGINNIS OFFICE, LLC

Current Principal Place of Business:

225 N.E. MIZNER BLVD,
STE 200
BOCA RATON, FL 33432

New Principal Place of Business:

2101 6TH AVENUE NORTH
SUITE 750
BIRMINGHAM, AL 35203

Current Mailing Address:

225 N.E. MIZNER BLVD,
STE 200
BOCA RATON, FL 33432

New Mailing Address:

2101 6TH AVENUE NORTH
SUITE 750
BIRMINGHAM, AL 35203

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAGG, K. LAWRENCE
200 S BISCAYNE BLVD, STE 4900
MIAMI, FL 33131 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: P ( ) Delete
Name: CROCKER, THOMAS
Address: 225 NE MIZER BLVD., SUITE 200
City-St-Zip: BOCA RATON, FL 33432

Title: VP ( ) Delete
Name: BECKER, CHRISTOPHER
Address: 2951 FLOWERS ROAD SOUTH #100
City-St-Zip: ATLANTA, GA 30341

Title: VP ( ) Delete
Name: BROCKWELL, THOMAS C
Address: 225 NE MIZNER BLVD., SUITE 200
City-St-Zip: BOCA RATON, FL 33432

Title: VPS (X) Delete
Name: AMARA, TODD J
Address: 225 NE MIZAR BLVD., SUITE 200
City-St-Zip: BOCA RATON, FL 33432

Title: VCF (X) Delete
Name: MCNELLY, TERENCE D
Address: 225 NE MISNER BLVD, STE 200
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: CEO (X) Change ( ) Addition
Name: THOMPSON, C REYNOLDS
Address: 2101 6TH AVENUE NORTH SUITE 750
City-St-Zip: BIRMINGHAM, AL 35203

Title: CFO (X) Change ( ) Addition
Name: ANDRESS, WESTON M
Address: 2101 6TH AVENUE NORTH SUITE 750
City-St-Zip: BIRMINGHAM, AL 35203

Title: CAO (X) Change ( ) Addition
Name: RIGRISH, JOHN P
Address: 2101 6TH AVENUE NORTH SUITE 750
City-St-Zip: BIRMINGHAM, AL 35203

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: JOHN P RIGRISH CAO 03/27/2008

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