

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # M06000006351



1. Entity Name
 CROWN IMPORTS LLC

Principal Place of Business: 1 SOUTH DEARBORN STREET, SUITE 1700 CHICAGO, IL 60603
 Mailing Address: 1 SOUTH DEARBORN STREET, SUITE 1700 CHICAGO, IL 60603



01312008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 20-5300132 Applied For: Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BERK, ALEXANDER 1 SOUTH DEARBORN STREET, SUITE 1700 CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARREOLA, JOSE M 111 CHAPEL HILL CIRCLE SAN ANTONIO, TX 78240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HACKETT, WILLIAM 242 PARK GLEN ELLYN, IL 60137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LURIE, MICHAEL 3658 NORTH SACRAMENTO CHICAGO, IL 60618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GORSKI, ROBERT 376 NORTH PARK BLVD GLEN ELLYN, IL 60137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRD SANDS, RICHARD 14 ELMWOOD HILL LANE ROCHESTER, NY 14610

U00000841634
 03/10/08-80024-022 138.75

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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.

SIGNATURE: *[Signature]* 1/31/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #