

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110007

**FILED
Apr 17, 2015
Secretary of State
CC9231980283**

Entity Name: CRAWFORD THOMAS LLC

Current Principal Place of Business:

429 S KELLER RD STE 250
ORLANDO, FL 32810

Current Mailing Address:

429 S KELLER RD STE 250
ORLANDO, FL 32810 US

FEI Number: 26-1322991

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINDEN, BRIAN K
429 S KELLER RD STE 250
ORLANDO, FL 32810 US

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

Authorized Person(s) Detail :

Title MGRM
Name LINDEN, BRIAN K
Address 429 S KELLER RD STE 250
City-State-Zip: ORLANDO FL 32810

Title MGRM
Name STONEHOUSE, WILLIAM CIII
Address 429 S KELLER RD STE 250
City-State-Zip: ORLANDO FL 32810

Title MGRM
Name BRUGUIERE, RUSSELL T
Address 429 S KELLER RD STE 250
City-State-Zip: ORLANDO FL 32810

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN LINDEN

MGRM

04/17/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date