

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000057350

**FILED**  
**Feb 24, 2015**  
**Secretary of State**  
**CC5855720455**

**Entity Name:** CRYSTAL MANAGER, LLC

**Current Principal Place of Business:**

837 OLD GROVE MANOR  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

837 OLD GROVE MANOR  
JACKSONVILLE, FL 32207

**FEI Number:** 26-2779507

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TURBOW, CAROL  
837 OLD GROVE MANOR  
JACKSONVILLE, FL 32207 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 MGR  
Name CRYSTAL, JR, JOHN A  
Address 45 BENTWOOD DRIVE  
City-State-Zip: MONTGOMERY TX 77356

Title MGR  
Name TURBOW, CAROL  
Address 837 OLD GROVE MANOR  
City-State-Zip: JACKSONVILLE FL 32207

Title MGR  
Name PALMER, MARY C  
Address 1 SUMMIT CIRCLE DRIVE  
City-State-Zip: MAHAPOC NY 10541

*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:** JOHN A. CRYSTAL, JR.

**MGR**

**02/24/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date