## 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006351

**Entity Name: CROWN IMPORTS LLC** 

**Current Principal Place of Business:** 

1 SOUTH DEARBORN STREET, SUITE 1700

CHICAGO, IL 60603

**Current Mailing Address:** 

1 SOUTH DEARBORN STREET, SUITE 1700 CHICAGO, IL 60603

FEI Number: 20-5300132 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

**FILED** Feb 18, 2014

**Secretary of State** 

CC5649670673

Authorized Person(s) Detail:

Title

HACKETT, WILLIAM Name

242 PARK Address

GLEN ELLYN IL 60137 City-State-Zip:

Title Т

Name GORSKI, ROBERT Address 376 NORTH PARK BLVD GLEN ELLYN IL 60137 City-State-Zip:

Title **DIRECTOR** 

SANDS, ROBERT S Name 4000 EAST AVENUE Address

City-State-Zip: **ROCHESTER NY 14618** 

Title

HUMPHREY, PERRY R Name 11 MUIRFIELD CT Address City-State-Zip: PITTSFIELD NY 14534 Title

S LURIE, MICHAEL Name

3658 NORTH SACRAMENTO Address

City-State-Zip: CHICAGO IL 60618

Title DIRECTOR

Name MULLIN, THOMAS J Address 109 AMBASSADOR DR ROCHESTER NY 14610 City-State-Zip:

VΡ Title

Name KLEIN, DAVID E Address **6 SUTTON POINT** 

City-State-Zip: PITTSFORD NY 14534

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.

02/18/2014 SIGNATURE: ROBERT GORSKI TREASURER