


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 18, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L00000004454  
 1. Entity Name  
 GRANGE L.L.C.



Principal Place of Business	Mailing Address
1001 3RD AVENUE WEST SUITE 700 BRADENTON, FL 34205	1001 3RD AVENUE WEST SUITE 700 BRADENTON, FL 34205

**DO NOT WRITE IN THIS SPACE**



02102005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1009283	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VENABLE, JOSEPH P  
 1400 4TH AVENUE WEST  
 BRADENTON, FL 34205

**DO NOT WRITE IN THIS SPACE**

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)

**Filing Fee is \$50.00  
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CRESPI, GIULIO VIA RISCOLI 2 20121 MILAN ITALY,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BENNEWITZ, ULI 1001 3RD AVENUE WEST BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHRISOPHER, ROBERT 1001 3RD AVENUE WEST BRADENTON, FL 34205
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 02/18/05-80042-001 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: *Robert Christopher* Robert Christopher 2/16/05 748-1040  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #