

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005730

FILED
May 13, 2004
Secretary of State

Entity Name: CRANE'S BEACHHOUSE, L.L.C.

Current Principal Place of Business:

82 GLEASA ST.
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

8929 WEST 174TH STREET
TINLEY PARK, IL 60477

New Mailing Address:

FEI Number: 65-1028660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARONSON, CAROLE ESQUIRE
102 NORTH SWINTON AVENUE
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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: CHRISTINE EASTWINE, ASST. SEC.

05/13/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CRANE, MICHAEL R
Address: 101 N. JAY ST.
City-St-Zip: MIDDLEBURG, VA 20117

Title: MGRM () Delete
Name: CRANE, CHERYL L
Address: 101 N. JAY ST.
City-St-Zip: MIDDLEBURG, VA 20117

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRANE, MICHAEL R
Address: 8929 WEST 174TH STREET
City-St-Zip: TINLEY PARK, IL 60477 US

Title: MGRM (X) Change () Addition
Name: CRANE, CHERYL L
Address: 8929 WEST 174TH STREET
City-St-Zip: TINLEY PARK, IL 60477 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CHERYL L. CRANE

MGRM

05/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date