2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000005734

t. Entity Name CRK REALTY OF FLORIDA, LLC

Principal Place of Business

558 CLINTON AVE. BRIDGEPORT, CT 06605 Mailing Address

558 CLINTON AVE. BRIDGEPORT, CT_06605

FILED Jan 09, 2004 08:00 AM Secretary of State



01062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 06-1583364 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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	bove named entity submits this statement for the purpose of cha oligations of registered agent.	angling its registered office or registered agent, or both, in t	the State of Florida. I am famil	ar with, and accept
SIGNATL	RE Signature, typed or printed name of registered agent and title if epolicable	(NOTE Registered Agent signature required when reinstaling)	DATE	
	Filing Fee is \$50.00 Due by May 1, 2004		The residence of	7. (2. <u>(2. (2. (2. (2. (2. (2. (2. (2. (2. (2. </u>
3.	MANAGING MEMBERS/MANAGERS		, <u>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	· · · · · · · · · · · · · · · · · · ·
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NAME	KLEWIN, CHARLIE			
)	-		

IFILE MGRM

NAME KLEWIN, CHARLIE

STREET ADDRESS
CITY-ST-ZIP NORWICH, CT 06360

IFILE ST

NAME ZEISLER, RICHARD
STREET ADDRESS
CITY-ST-ZIP BRIDGEPORT, CT 06605

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NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

000000001208 01/09/04-80030-013 50.00

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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 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 known as the provided this priport as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

16/03

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