2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L00000016015

1. Entity Name CRO AIRCRAFT LLC



FILED Apr 21, 2004 8:00 am Secretary of State

04-21-2004 90451 007 ****50.00

Principal Place of Business

C/O COMMERCE GROUP, INC. 1280 WEST NEWPORT CENTER DR. DEERFIELD BEACH, FL 33442 Mailing Address

C/O COMMERCE GROUP, INC. 1280 WEST NEWPORT CENTER DR. DEERFIELD BEACH, FL 33442



04092004 No Chg-LLC

CR2E083 (10/03)

F 0 10 1 1 1 1	 \$5.0	0	Additional
65-1071360	 		Not Applicable
4. FEI Number			Applied For

5. Certificate of Status Desired

Fee Required

6.	Name and	Address	of C	urrent	Registe	red A	gent
		- 2	SN .				
					*		

O'BOYLE, SHEILA L 23 NORTH HIDDEN HARBOUR DRIVE GULF STREAM, FL 33483

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	e named entity submits this statement for the purpose of cha tions of registered agent.	nging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2004		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM CRO REALTY, INC. 1280 WEST NEWPORT CENTER DR. DEERFIELD BEACH, FL 33442		
TITLE NAME STREET ADDRESS			

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CITY-ST-ZIP			<u> </u>	· · · · · · · · · · · · · · · · · · ·
indicatéd	certify that the information supplied with this filing does not qualify for the exer I on this report is true and accurate and that my signature shall have the same ability company or the receiver or trustee empowered to execute this report as	e legal effect as if made unde	eroath; that I am a ma	es. I further certify that the information naging member or manager of the

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME
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CITY-ST-ZIP
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NAME
STREET ADDRESS

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

- 4/16/04 Date 034860770 Oaytime Phone #