## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L01000017838

1. Entity Name **CRO LLC** 



Principal Place of Business

3801 MANATEE AVE. W. BRADENTON, FL 34205 Mailing Address

522 56TH STREET HOLMES BEACH, FL 34217

## **FILED** Mar 27, 2006 8:00 am Secretary of State

03-27-2006 90045 021 \*\*\*\*50.00

-unen/08



03202006 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 65-1149264 Not Applicable \$5.00 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

CROWE, DEBRA SUE 522 56TH STREET HOLMES BEACH, FL 34217

CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chan ions of registered agent.	nging its registere	d office or registered agent, or both, in the	e 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
FI D	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	P			
NAME	CROWE, ROBERT D			
STREET ADDRESS	522 56TH STREET			
CITY-ST-ZIP	HOLMES BEACH, FL 34217			
TITLE	VP			
NAME	CROWÉ, DEBRA S			
STREET ADDRESS	522 56TH STREET			
CITY-ST-ZIP	HOLMES BEACH, FL 34217			
TITLE				
NAME				
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this eport 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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