

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009510

FILED
Aug 28, 2007
Secretary of State

Entity Name: CHRIVANI, L.L.C.

Current Principal Place of Business:

5685 SOUTH HIGHWAY A1A
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

1745 NORTH A1A
INDIALANTIC, FL 32903

Current Mailing Address:

5685 SOUTH HIGHWAY A1A
MELBOURNE BEACH, FL 32951

New Mailing Address:

5695 SOUTH HIGHWAY A1A
MELBOURNE BEACH, FL 32951

FEI Number: 04-3655640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GAGNON, MICHAEL C
404 4TH AVENUE
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GACCIONE, WALTRAUT
Address: 5865 S. HIGHWAY A1A
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: MGR () Delete
Name: GAGNON, NICOLE L
Address: 2207 ATLANTIC STREET #821
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GACCIONE, WALTRAUT
Address: 5695 S. HIGHWAY A1A
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WALTRAUT GACCIONE

MGR

08/28/2007

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