

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015108

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: CRT, LLC

## Current Principal Place of Business:

4440 LAFAYETTE ST  
SUITE G  
MARIANNA, FL 32446

## New Principal Place of Business:

## Current Mailing Address:

4440 LAFAYETTE ST  
SUITE G  
MARIANNA, FL 32446

## New Mailing Address:

FEI Number: 03-0464066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANGELO, BARRY & BOLDT, P.A.  
SUNTRUST CENTER  
515 EAST OLAS BOULEVARD, SUITE 850  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

ANGELO, BARRY & BANTA, P.A.  
SUNTRUST CENTER  
515 EAST OLAS BOULEVARD, SUITE 850  
FORT LAUDERDALE, FL 33301 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: THOMAS P. ANGELO, ESQ.

04/26/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: WARD, JAMES B  
Address: 9433 JACKSON STREET  
City-St-Zip: MARIANNA, FL 32447

Title: MGRM ( ) Delete  
Name: DYKES, DWIGHT  
Address: 4779 POWERLINE RD  
City-St-Zip: POMPANO BEACH, FL 33073

## ADDITIONS/CHANGES:

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

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

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: DWIGHT DYKES

MGRM

04/26/2004

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