## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000027539

**Current Principal Place of Business:** 

MCDANIEL, GAYLE

MCDANIEL, GAYLE

WRIGHT, RALPH

2100 NE 65TH STREET

3200 PORT ROYALE DRIVE N SUITE 1710

3200 PORT ROYALE DRIVE N SUITE 1710

FORT LAUDERDALE, FL 33308

FORT LAUDERDALE, FL 33308

FORT LAUDERDALE, FL 33308

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Entity Name: CORAV HOLDINGS 2, LLC

FILED Mar 18, 2009 Secretary of State

**New Principal Place of Business:** 

HANGAR	51ST PLACE 31A JDERDALE, FL	33309 US	6901 E. CHAUNCEY L SUITE 3104 PHOENIX, AZ 85054	ANE US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 171	T ROYALE DRIN 10 JDERDALE, FL				
FEI Number	:	FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and	d Address of Cu	ırrent Registered Agent:	Name and Address o	f New Registered Agent:	
1203 GOV SUITE 101	S FILINGS INCO 'ERNORS SQUA 1 SSEE, FL 32301	ARE BLVD			
	e named entity su e of Florida.	bmits this statement for th	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI					
	Electronic	Signature of Registered A	Agent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	WRIGHT, RICHAR	ALE DRIVE N. SUITE 1710	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	WRIGHT, RICHAF	ALE DRIVE N. SUITE 1710	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MCDANIEL, ĠÁYI	ALE DRIVE N SUITE 1710	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	T ()D	Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

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SIGNATURE: RICHARD K WRIGHT MGRM 03/18/2009