

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002419

Entity Name: CRYSTAL HOMES, LLC

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

2421 NORTH LECANTO HIGHWAY
LECANTO, FL 34461

New Principal Place of Business:

2421 NORTH LECANTO HIGHWAY
LECANTO, FL 34461 US

Current Mailing Address:

2421 NORTH LECANTO HIGHWAY
LECANTO, FL 34461

New Mailing Address:

P.O. BOX 4276
HOMOSASSA SPRINGS, FL 34447 US

FEI Number: 56-2316508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUNNINGHAM, KEVIN
2421 NORTH LECANTO HIGHWAY
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

WOOD, ARTHUR W III
30 JAMAICA STREET
HOMOSASSA, FL 34446 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: ARTHUR W. WOOD III

04/21/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: WOOD, ARTHUR III
Address: 30 JAMAICA STREET
City-St-Zip: HOMOSASSA, FL 34448

Title: MGRM (X) Delete
Name: CUNNINGHAM, KEVIN
Address: 2421 N. LECANTO HIGHWAY
City-St-Zip: LECANTO, FL 34461

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WOOD, ARTHUR W III
Address: 30 JAMAICA STREET
City-St-Zip: HOMOSASSA, FL 34446 US

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: ARTHUR W. WOOD III

MGRM

04/21/2005

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