

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000010359

1. Entity Name
CROWNCOOPER, LLC



Principal Place of Business

7068 COMMERCIAL WAY
WEEKI WACHEE, FL 34613

Mailing Address

7068 COMMERCIAL WAY
WEEKI WACHEE, FL 34613

DO NOT WRITE IN THIS SPACE



01072008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-0616726

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

JAMES, G. RANDY ATTY.
4230 S. MACDILL AVE., SUITE K
TAMPA, FL 33611

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

FILE NOW!!! - FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

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05/21/06-80063-019 150.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COOPER, RONALD W OWNER 7613 JOMEL DRIVE SPRING HILL, FL 34607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COOPER, MICHELLE L OWNER 7613 JOMEL DRIVE SPRING HILL, FL 34607
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/28/08-80063-019 138.75

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X

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

Date

Daytime Phone #