## 2007 LIMITED LIABILITY COMPANY

## Apr 30, 2007 08:00 All Secretary of State **ANNUAL REPORT** DOCUMENT # L03000013856 CRANEWOODS, LLC Principal Place of Business Mailing Address 328 2ND AVENUE NORTH 328 2ND AVENUE NORTH JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 01252007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0008795 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOWE, ANDREW M DO NOT WRITE 328 2ND AVE N JACKSONVILLE BEACH, FL 32250 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 reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE HOWE, ANDREW M MGRM STREET ADDRESS 328 2ND AVENUE NORTH JACKSONVILLE BEACH, FL 32250 CITY-ST-7IP U00000745146 05/16/07-80017-023 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 empawered to execute this report as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> NG MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR PRINTED NAME

**FILED**