


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90073 004 ****50.00

DOCUMENT # L03000029964	
1. Entity Name CRYSTAL ONE, L.L.C.	

Principal Place of Business C/O JAY VERONA 7235 FIRST AVENUE SOUTH ST. PETERSBURG, FL 33707	Mailing Address C/O JAY VERONA 7235 FIRST AVENUE SOUTH ST. PETERSBURG, FL 33707
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address 15500 Roosevelt Blvd. Suite 303 Clearwater, FL 33760 City & State Zip
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03182004 Chg-LLC CR2E083 (10/03)

6. Name and Address of Current Registered Agent VERONA, JAY B 7235 FIRST AVENUE SOUTH ST. PETERSBURG, FL 33707		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Filing Fee is \$50.00 Due by May 1, 2004	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Rogers K. Haydon, Jr. 15500 Roosevelt Blvd #303 Clearwater, FL, 33760 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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:  **ROGERS K. HAYDON, JR** **4/23/04** **727-539-0777**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #