

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000051948

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** CRAB ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

3491 GANDY BLVD.  
SUITE 215  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

1825 BRIGHTWATERS BLVD., NE  
SAINT PETERSBURG, FL 33704

**Current Mailing Address:**

3491 GANDY BLVD.  
SUITE 215  
PINELLAS PARK, FL 33781

**New Mailing Address:**

1825 BRIGHTWATERS BLVD., NE  
SAINT PETERSBURG, FL 33704

**FEI Number:** 20-0470252

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAJOWECO II INC.  
1825 BRIGHTWATERS BLVD., NE  
ST. PETERSBURG, FL 33704 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MAJOWECO II INC.  
**Address:** 1825 BRIGHTWATERS BLVD., NE  
**City-St-Zip:** ST. PETERSBURG, FL 33704

I hereby 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:** MAJOWECO II INC.

MGRM

01/05/2011

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