## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000055605

Entity Name: CRT/MCGINNIS OFFICE, LLC

225 NE MISNER BLVD, STE 200

BOCA RATON, FL 33432

Address:

City-St-Zip:

FILED Mar 21, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 225 N.E. MIZNER BLVD. STE 200 BOCA RATON, FL 33432 **New Mailing Address: Current Mailing Address:** 225 N.E. MIZNER BLVD, STE 200 BOCA RATON, FL 33432 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRAGG, K. LAWRENCE 200 S BISCAYNE BLVD, STE 4900 MIAMI, FL 33131 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete CROCKER, THOMAS Name: Name: 225 NE MIZER BLVD., SUITE 200 Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: BECKER, CHRISTOPHER Name: Address: 2951 FLOWERS ROAD SOUTH #100 Address: City-St-Zip: ATLANTA, GA 30341 City-St-Zip: Title: () Delete Title: () Change () Addition BROCKWELL, THOMAS C Name: Name: 225 NE MIZNER BLVD., SUITE 200 Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: **VPS** ( ) Delete Title: () Change () Addition Name: AMARA, TODD J Name: 225 NE MIZAR BLVD., SUITE 200 Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: VCF ( ) Delete Title: () Change () Addition MCNELLY, TERENCE D Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: JOHN RIGRISH MGRM 03/21/2007