

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000013882

Entity Name: CRAIN CONSULTING, LLC

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

3006 S.E EAST GLASGOW  
STUART,, FL 34997

**New Principal Place of Business:**

3006 S.E GLASGOW DRIVE  
STUART,, FL 34997

**Current Mailing Address:**

3006 S.E EAST GLASGOW  
STUART,, FL 34997

**New Mailing Address:**

3006 S.E GLASGOW DRIVE  
STUART,, FL 34997

FEI Number: 20-0752281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRAIN, RANDALL R  
3006 S.E. GLASGOW  
STUART, FL 34997 US

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

CRAIN, RANDALL R  
3006 S.E. GLASGOW DRIVE  
STUART, FL 34997 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: RANDALL R CRAIN

04/29/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: CRAIN, RANDALL R  
Address: 3006 S.E. GLASGOW  
City-St-Zip: STUART, FL 34997

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CRAIN, RANDALL R  
Address: 3006 S.E. GLASGOW DRIVE  
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RANDALL R CRAIN

MGRM

04/29/2005

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