2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016343

Entity Name: CROWNE ATLANTIC PROPERTIES, LLC

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 620 N WYMORE RD SUITE 260 MAITLAND, FL 32751 **Current Mailing Address: New Mailing Address:** 620 N WYMORE RD STE 260 MAITLAND, FL 32751 FEI Number: 84-1644338 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OSSIN, ARCHIE 620 NÓRTH WYMORE ROAD SUITE 260 MAITLAND, FL 32751 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: () Delete (X) Change () Addition OSSIN, ARCHIE OSSIN, ARCHIE MGR Name: Name: Address: 620 N WYMORE RD STE 260 Address: 620 N WYMORE RD STE 260 City-St-Zip: MAITLAND, FL 327514253 City-St-Zip: MAITLAND, FL 327514253 Title: MGRM () Delete Title: () Change () Addition Name: OSSIN, JACQUELINE MGRM Name: Address: 620 NORTH WYMORE ROAD, SUITE 260 Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: MGRM () Change (X) Addition Name: OSSIN, LEE Name: 620 NORTH WYMORE ROAD, SUITE 260 Address: Address: City-St-Zip: City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: ARCHIE OSSIN MGR 01/20/2009