

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000021597

1. Entity Name
CRANE AIR CONDITIONING, LLC



Principal Place of Business
**198 SW 6TH AVE.
BOCA RATON, FL 33486 US**

Mailing Address
**198 SW 6TH AVE.
BOCA RATON, FL 33486 US**



01102006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0905013

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SIEGEL, RONALD L
1800 NW CORPORATE BLVD.
SUITE #302
BOCA RATON, FL 33431**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BATTISTO, JETH
STREET ADDRESS	198 SW 6TH AVE.
CITY-ST-ZIP	BOCA RATON, FL 33486
TITLE	MGRM
NAME	EKSTROM, JOHN
STREET ADDRESS	1525 NW 121ST DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	MGRM
NAME	RENNA, TODD
STREET ADDRESS	1238 OAKWATER DRIVE
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/24/06-00083-018 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/11/06 561-308-2138