

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000031300**

**1. Entity Name**  
**CROWSNEST PROPERTIES, LLC**



**Principal Place of Business**  
**C/O BUTZEL LONG, P.C.**  
**STE 420, 1200 N FEDERAL HWY**  
**BOCA RATON, FL 33432**

**Mailing Address**  
**C/O BUTZEL LONG, P.C.**  
**STE 420, 1200 N FEDERAL HWY**  
**BOCA RATON, FL 33432**



02012006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
**20-1054284**

**Applied For**  
**Not Applicable**

**5. Certificate of Status Desired** ☐ **\$5.00 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**LONG, JOHN J JR**  
**BUTZEL LONG, P.C.**  
**1200 N FEDERAL HWY**  
**BOCA RATON, FL 33432**

**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 re-registering)*

**DATE**

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

**9. MANAGING MEMBERS/MANAGERS**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**MGR**  
**FIRE CORAL MANAGEMENT, INC.**  
**1200 N FEDERAL HWY, STE 420**  
**BOCA RATON, FL 33432**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**NAME**  
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**NAME**  
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**CITY-ST-ZIP**

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**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*

**JAY E. LASNER, PRESIDENT**  
**FIRE CORAL MGMT, INC, MANAGER**

**3/29/06 (954) 561-7800**

**Date**

**Daytime Phone #**