

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2007 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**

000000633002
04/18/07-80063-012 50.00



DO NOT WRITE IN THIS SPACE

01082007No Chg-LLC

CR2E083 (11/05)

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**

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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, 2007**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 #

Jay E. LASNER
J. E. Lasner, President, Fire Coral Mgmt, Inc, Manager 4/7/07 (954) 501-7800