

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069603

FILED
Mar 19, 2008
Secretary of State

Entity Name: CROP CIRCLE INSTITUTE OF AMERICA, LLC

Current Principal Place of Business:

437 EBBTIDE DR
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

437 EBBTIDE DR
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 87-0733247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HURT, JEFF
437 EBBTIDE DR
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

HURT, JACKIE M
437 EBBTIDE DR
NORTH PALM BEACH, FL 33408 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: JACKIE M HURT

03/19/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HURT, JACKIE
Address: 437 EBBTIDE DR
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGRM () Delete
Name: HURT, RYAN
Address: 437 EBBTIDE DR
City-St-Zip: NORTH PALM BEACH, FL 33408 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HURT, JEFF
Address: 437 EBBTIDE DR
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFF HURT

MGRM

03/19/2008

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