

DOCUMENT# L04000074394

Entity Name: CRISIS RESOLUTION INSTITUTE LLC

Current Principal Place of Business:

1714 PRIMROSE LANE
SEBRING, FL 33872

New Principal Place of Business:**Current Mailing Address:**

PO BOX 8002
SEBRING, FL 33870

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRISON, WILLIAM E
1714 PRIMROSE LANE
SEBRING, FL 33872 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: GARRISON, WILLIAM E
Address: 1714 PRIMROSE LANE
City-St-Zip: SEBRING, FL 33872

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM E. GARRISON

MGR

01/15/2007

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