

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089794

Entity Name: THE CRAZY EIGHT, LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

2239 OLD GUNN HWY
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

5364 EHRLICH RD
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-1277632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAND, LEE L
2239 OLD GUNN HWY
ODESSA, FL 33556 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: BRAND, LEE L
Address: 2239 OLD GUNN HWY
City-St-Zip: ODESSA, FL 33556

Title: MGR () Delete
Name: ISENBERGER, JACQUELYN M
Address: 4905 CRUZ BAY DR
City-St-Zip: MONROE, NC 28110

Title: MGR () Delete
Name: BRAND, STEPHEN L
Address: 2 LISA BETH DRIVE
City-St-Zip: DOVER, NH 03820

Title: MGR () Delete
Name: DALTON-HURST, DONNA A
Address: 6001 12TH WAY NORTH
City-St-Zip: ST. PETERSBURG, FL 33703

ADDITIONS/CHANGES:

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

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

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

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: LEE L. BRAND

MGR

04/15/2009

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