

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000007178

**FILED**  
**Apr 16, 2009**  
**Secretary of State**

**Entity Name:** COMMERCIAL RESIDENTIAL INVESTMENTS, LLC

**Current Principal Place of Business:**

851 SIESTA KEY CIRCLE  
SARASOTA, FL 34242

**New Principal Place of Business:**

**Current Mailing Address:**

851 SIESTA KEY CIRCLE  
SARASOTA, FL 34242

**New Mailing Address:**

**FEI Number:** 20-2216643      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ICARD, MERRILL, CULLIS, ET AL  
ATTN: F. THOMAS HOPKINS, ESQ.  
2033 MAIN STREET, SUITE 600  
SARASOTA, FL 34237 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: PRES ( ) Delete  
Name: TEFFENHART, TOM J PRES  
Address: 851 SIESTA KEY CIRCLE  
City-St-Zip: SARASOTA, FL 34242 US

**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 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: THOMAS TEFFENHART      PRES      04/16/2009

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