

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000008174

Entity Name: ASHBRIIT CCEP, LLC

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

480 SOUTH ANDREWS AVE., SUITE 103  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

480 SOUTH ANDREWS AVE., SUITE 103  
POMPANO BEACH, FL 33069

**New Mailing Address:**

FEI Number: 20-2221017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CFRA, LLC  
COPORATE CENTER THREE AT INTL. PLAZA  
4221 W. BOY SCOUT BLVD., 10TH FLOOR  
TAMPA, FL 336075736 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: VPST  
Name: PERKINS, RANDAL  
Address: 480 SOUTH ANDREWS ST SUITE 113  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby 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: KEVIN L MAY-CONTROLLER

CNTL

03/04/2010

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