

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

9/11/2008-90025-021-\$138.75-\$138.75

FILED

2008 OCT -3 PM 12: 27

SECRETARY OF STATE
TALLAHASSEE 500910330



09052008 No Chg-LLC CR2E083 (12/07)

DOCUMENT # L05000015262

1. Entity Name
GREAT DANE INVESTMENT I, LLC



Principal Place of Business
1509 NE 4 AVENUE
FT. LAUDERDALE, FL 33304 US

Mailing Address
1509 NE 4 AVENUE
FT. LAUDERDALE, FL 33304 US

DO NOT WRITE IN THIS SPACE

4. FEI Number 83-0420615	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CRICHTON, DANE
1509 NE 4 AVENUE
FT. LAUDERDALE, FL 33304

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when renewing)

9/24/08
DATE

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRICHTON, DANE 1509 NE 4 AVENUE FT LAUDERDALE, FL 33304
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.

SIGNATURE: See above

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #