2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035298

Entity Name: CRUPI FAMILY MANAGEMENT, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
10651 VERSAILLES BOULEVARD WELLINGTON, FL 33467 US	6625 NW 122ND AVENUE PARKLAND, FL 33076 US

Current Mailing Address:	**New Mailing Address:**
10651 VERSAILLES BOULEVARD WELLINGTON, FL 33467 US	6625 NW 122ND AVENUE PARKLAND, FL 33076 US

FEI Number: 20-4329966   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SAUERBERG, ERIC M 200 VILLAGE SQUARE CROSSING SUITE 102 PALM BEACH GARDENS, FL 33410 US	

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:	**ADDITIONS/CHANGES:**
Title: MGR ( ) Delete Name: CRUPI, DAVID J Address: 10651 VERSAILLES BOULEVARD City-St-Zip: WELLINGTON, FL 33467 US	Title: MGR (X) Change ( ) Addition Name: CRUPI, DAVID J Address: 6625 NW 122ND AVE City-St-Zip: PARKLAND, FL 33076 US
Title: MGR ( ) Delete Name: CRUPI, KRISTINA J Address: 10651 VERSAILLES BOULEVARD City-St-Zip: WELLINGTON, FL 33467 US	Title: MGR (X) Change ( ) Addition Name: CRUPI, KRISTINA J Address: 6625 NW 122ND AVENUE City-St-Zip: PARKLAND, FL 33076 US

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: DAVID CRUPI   MGR   01/15/2008
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date