2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059144

Entity Name: CROWN DEVELOPMENT, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
2502 N. ROCKY POINT DR., SUITE 1000 TAMPA, FL 33607	2502 N ROCKY POINT DR, SUITE 1000 TAMPA, FL 33607

Current Mailing Address:	**New Mailing Address:**
2502 N. ROCKY POINT DR., SUITE 1000 TAMPA, FL 33607	2502 N ROCKY POINT DR, SUITE 1000 TAMPA, FL 33607

FEI Number: 20-3051720   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:**
TOBACK, DAVID 1700 SOUTH MACDILL AVENUE, SUITE 200 TAMPA, FL 33629 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:	( ) Delete	Title:	PRES ( ) Change (X) Addition
Name:		Name:	DIASTI, ADAM
Address:		Address:	2502 N ROCKY POINT DR #1000
City-St-Zip:		City-St-Zip:	TAMPA, FL 33607
Title:	( ) Delete	Title:	VP ( ) Change (X) Addition
Name:		Name:	DIASTI, TEREK
Address:		Address:	2502 N ROCKY POINT DR #1000
City-St-Zip:		City-St-Zip:	TAMPA, FL 33607
Title:	( ) Delete	Title:	SEC ( ) Change (X) Addition
Name:		Name:	DIASTI, TIM
Address:		Address:	2502 N ROCKY POINT DR #1000
City-St-Zip:		City-St-Zip:	TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM DIASTI   PRES   04/20/2006
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date