

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087127

Entity Name: CROSINGNO GROUP, LLC

FILED
Jan 06, 2010
Secretary of State

Current Principal Place of Business:

2144 HENLEY PLACE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

13781 EXOTICA LANE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 06-1755262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROTEAU, JULES M
2144 HENLEY PLACE
WELLINGTON, FL 33414 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: MGRM
Name: CROTEAU, JULES M
Address: 2144 HENLEY PLACE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGRM
Name: CROTEAU, JENNIFER L
Address: 2144 HENLEY PLACE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGRM
Name: SINRAM, RONALD H
Address: 13781 EXOTICA LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGRM
Name: SINRAM, MARIE A
Address: 13781 EXOTICA LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGRM
Name: SINRAM, RYAN T
Address: 13499 LAMIRADA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGRM
Name: SINRAM, ALEXIS Q
Address: 13499 LAMIRADA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33414

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: RONALD SINRAM

MGRM

01/06/2010

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

L05000087127

10. MANAGING MEMBERS / MANAGERS		11. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARCEL R. CROTEAU 1873 HOLLYHOCK ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUCILLE M. CROTEAU 1873 HOLLYHOCK ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FREDERICK MALUAGNO 10654 94TH PLACE NORTH SEMINOLE, FL 33772 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUSAN L. MALUAGNO 10654 94TH PLACE NORTH SEMINOLE, FL 33772 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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