

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101510

Entity Name: CR CITRUS, LLC

FILED  
Jan 13, 2009  
Secretary of State

**Current Principal Place of Business:**

1514 ROBERTS DRIVE  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

17 LAVISTA DRIVE  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

1514 ROBERTS DRIVE  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

17 LAVISTA DRIVE  
PONTE VEDRA BEACH, FL 32082

FEI Number: 20-3633165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STONEBURNER BERRY & SIMMONS, P.A.  
841 PRUDENTIAL DRIVE, SUTIE 1400  
JACKSONVILLE, FL 32207 US

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

S.S. SIMMONS, PL  
1050 RIVERSIDE AVE  
JACKSONVILLE, FL 32204 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: SIDNEY S. SIMMONS

01/13/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BARRINGTON GROUP, IN, C.  
Address: 1514 ROBERTS DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BARRINGTON GROUP, IN, C.  
Address: 17 LAVISTA DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: JOHN H. HANAN, BARRINGTON GROUP, INC.

MGR

01/13/2009

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