

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118764

Entity Name: CRAZY CROW CABIN, LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

1900 RINGLING BOULEVARD
SARASOTA, FL 34236 US

New Principal Place of Business:

1515 VEREDA VERDE
SARASOTA, FL 34232 US

Current Mailing Address:

1900 RINGLING BOULEVARD
SARASOTA, FL 34236 US

New Mailing Address:

1515 VEREDA VERDE
SARASOTA, FL 34232 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KROTEC, PETER
1900 RINGLING BOULEVARD
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

KROTEC, JOHN T
1515 VEREDA VERDE
SARASOTA, FL 34232 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: JOHN T. KROTEC

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KROTEC, PETER
Address: 1900 RINGLING BOULEVARD
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM () Delete
Name: KROTEC, JOHN F
Address: 2551 WAMETA DRIVE
City-St-Zip: SARASOTA, FL 34231 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KROTEC, JOHN T
Address: 1515 VEREDA VERDE
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM (X) Change () Addition
Name: KROTEC, PETER J
Address: 1900 RINGLING
City-St-Zip: SARASOTA, FL 34236 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: JOHN T. KROTEC

PRES

04/15/2009

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