

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015452

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: CRANE AH, LLC

**Current Principal Place of Business:**

P.O. BOX 420529  
SUMMERLAND KEY, FL 33042

**New Principal Place of Business:**

830 CRANE BLVD  
SUGARLOAF KEY, FL 33042

**Current Mailing Address:**

P.O. BOX 420529  
SUMMERLAND KEY, FL 33042

**New Mailing Address:**

FEI Number: 20-4338668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SZMANSKY, ROBIN R  
P.O. BOX 420529  
SUMMERLAND KEY, FL 33042 US

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

SZMANSKY, ROBIN R  
830 CRANE BLVD  
SUGARLOAF KEY, FL 33042 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: ROBIN SZMANSKY

04/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WF ENTERPRISES, LLC,  
Address: P.O. BOX 420529  
City-St-Zip: SUMMERLAND KEY, FL 33042

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBIN SZMANSKY

MGR

04/27/2007

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