


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Aug 19, 2008 8:00 am**  
**Secretary of State**

07-17-2008 90016 027 \*\*\*138.75

**DOCUMENT # L06000024258**

1. Entity Name  
**CREX-MCBURNEY LLC**



Principal Place of Business <b>1901 AVENUE OF THE STARS, SUITE 400          LOS ANGELES, CA 90067</b>	Mailing Address <b>1901 AVENUE OF THE STARS, SUITE 400          LOS ANGELES, CA 90067</b>
--	--

**30010931**



08142008 No Chg-LLC CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MCBURNEY, CHARLES W JR  
 76 S. LAURA STREET, SUITE 590  
 JACKSONVILLE, FL 32202**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS ~~\$538.75~~ \$138.75**  
**Due by September 12, 2008**

**NOTICE NOT RECEIVED**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR KESSLER, WARREN J 1901 AVENUE OF THE STARS, SUITE 400 LOS ANGELES, CA 90067</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** *Charles W. McBurney, Jr.* **Charles W. McBurney, Jr.** *8/14/08* **8/14/08** *904-798-0002* **904-798-0002**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #