2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2009
Secretary of State

DOCUMENT# L06000053325

Entity Name: CRISPAIR LLC

Current Principal Place of Business:

90 KERRY PLACE
SUITE 2
NORWOOD, MA 02062 US

New Principal Place of Business:

Current Mailing Address:

90 KERRY PLACE
SUITE 2
NORWOOD, MA 02062 US

New Mailing Address:

FEI Number: 03-0592728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

A V O LAW GROUP, P.A.
407 LINCOLN ROAD
SUITE 9-L
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

A V O LAW GROUP, P.A.
169 EAST FLAGLER STREET
SUITE 1125
MIAMI, FL 33139 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: _____ 07/06/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	ORTEGA, ARNEL V	
Address:	407 LINCOLN ROAD, SUITE 9-L	
City-St-Zip:	MIAMI BEACH, FL 33139 US	
Title:	MGRM	( ) Delete
Name:	MCCAFFREY, CHARLES G IV	
Address:	1111 KANE CONCOURSE, SUITE 501	
City-St-Zip:	BAY HARBOR ISLANDS, FL 33154 US	
Title:	MGRM	( ) Delete
Name:	PERRY, STEPHEN C	
Address:	90 KERRY PLACE, SUITE 2	
City-St-Zip:	NORWOOD, MA 02062 US	
Title:	MGRM	( ) Delete
Name:	GILMORE, DONNA	
Address:	90 KERRY PLACE, SUITE 2	
City-St-Zip:	NORWOOD, MA 02062 US	

ADDITIONS/CHANGES:

Title:	MGRM	(X) Change ( ) Addition
Name:	ORTEGA, ARNEL V	
Address:	169 EAST FLAGLER STREET, SUITE 1125	
City-St-Zip:	MIAMI, FL 33139 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: DONNA GILMORE MGMR 07/06/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date