


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # L06000089460	
1. Entity Name CRISER/MONCRIEF, LLC	

Principal Place of Business 8006 LEGEND CREEK DRIVE MIRAMAR BEACH, FL 32550 US	Mailing Address 8006 LEGEND CREEK DRIVE MIRAMAR BEACH, FL 32550 US
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DO NOT WRITE IN THIS SPACE



04032008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5525284	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MCGILL, ROBERT E III
 36008 EMERALD COAST PARKWAY
 SUITE 301
 DESTIN, FL 32541

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRISER, PEGGY ANN 214 PARKWOOD CIR NICEVILLE, FL 32578
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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:  DATE: April 3, 2008 DAYTIME PHONE #: 850.585.2804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

850.585.2804