

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000101386

Entity Name: CRI LEASING, LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5601 2ND STREET WEST  
LEHIGH ACRES, FL 33971

**New Principal Place of Business:**

**Current Mailing Address:**

5601 2ND STREET WEST  
LEHIGH ACRES, FL 33971

**New Mailing Address:**

FEI Number: 20-5825493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAILEY, GLENN E  
5601 2ND STREET  
LEHIGH ACRES, FL 33971 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BAILEY, GLENN V  
Address: 5601 2ND STREET WEST  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: PST  
Name: BAILEY, GLENN V  
Address: 5601 2ND STREET WEST  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VP  
Name: RAKOS, CHRISTOPHER S  
Address: 5601 2ND STREET WEST  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby 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: GLENN BAILEY

MGR

01/05/2010

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