

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112094

Entity Name: CRPM, LLC

FILED  
Apr 07, 2008  
Secretary of State

**Current Principal Place of Business:**

8687 W. IRLO BRONSON MEMORIAL HWY  
SUITE 231  
KISSIMMEE, FL 34747

**New Principal Place of Business:**

**Current Mailing Address:**

8687 W. IRLO BRONSON MEMORIAL HWY  
SUITE 231  
KISSIMMEE, FL 34747

**New Mailing Address:**

FEI Number: 20-5917962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEARY, WILLIAM N  
8687 W. IRLO BRONSON MEMORIAL HWY  
SUITE 200  
KISSIMMEE, FL 34747 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: MGRM ( ) Delete  
Name: LEARY, WILLIAM N  
Address: 1100 PALMER AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM ( ) Delete  
Name: LEARY, STEVEN J  
Address: 1401 PELHAM  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LEARY, WILLIAM N  
Address: 2180 PARK AVE N., SUITE 322  
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM (X) Change ( ) Addition  
Name: LEARY, STEVEN J  
Address: 422 RAINTREE CT  
City-St-Zip: WINTER PARK, FL 32789

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: WILLIAM N. LEARY

MGRM

04/07/2008

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