2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008585

Entity Name: CR SOUTH, LLC

FILED Apr 16, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4100 CENTER POINTE DRIVE, SUITE 108 FORT MYERS, FL 33916

Current Mailing Address: New Mailing Address:

4100 CENTER POINTE DRIVE, SUITE 108 FORT MYERS, FL 33916

FEI Number: 26-2562297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FOWLER, DAVID K HENDERSON, FRANKLIN, STARNES & HOLT PA 1648 PERIWINKLE WAY, STE. B SANIBEL, FL 33957 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: CEO

Name: SCHAPIRO, J.M.

Address: 1427 CLARKVIEW RD, SUITE 500 City-St-Zip: BALTIMORE, MD 21209

Title: VP

Name: PARKER, GENE

Address: 1427 CLARKVIEW RD, SUITE 500

City-St-Zip: BALTIMORE, MD 21209

Title: VF

Name: LUETKEMEYER, JOHN A JR Address: 1427 CLARKVIEW RD, SUITE 500

City-St-Zip: BALTIMORE, MD 21209

Title: VF

Name: SCHAPIRO, J. MARK

Address: 1427 CLARKVIEW RD, SUITE 500

City-St-Zip: BALTIMORE, MD 21209

Title: VP

Name: MCCOY, NICHOLAS F

Address: 1427 CLARKVIEW RD, SUITE 500

City-St-Zip: BALTIMORE, MD 21209

Title: VP

Name: WILLIAMS, MICHELE

Address: 1427 CLARKVIEW RD, SUITE 500

City-St-Zip: BALTIMORE, MD 21209

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 Statues.

SIGNATURE: MICHELE WILLIAMS VP 04/16/2012