

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000038035

FILED
Apr 22, 2009
Secretary of State

Entity Name: CROSS COUNTRY MOTEL & RENTALS LLC

Current Principal Place of Business:

5100 SOUTH PINE AVE
OCALA , FLORIDA, 34480

New Principal Place of Business:

5100 SOUTH PINE AVE
OCALA ,, FL 34480

Current Mailing Address:

P.O.BOX 1010
OKLAWAHA, FLORIDA, 32183

New Mailing Address:

P.O.BOX 1010
OKLAWAHA, FL 32183

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUPNARAIN, MUNIE R
9982 HWY 464C
OKLAWAHA, FL 32179 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 () Delete
Name: RUPNARAIN, MUNIE R
Address: 9982 HWY 464C
City-St-Zip: OKLAWAHA, FL 32179

Title: MGR () Delete
Name: RUPNARAIN, HEMWATIE
Address: 9982 HWY 464C
City-St-Zip: OKLAWAHA, FL 32179

ADDITIONS/CHANGES:

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: MUNIE RUPNARAIN

MGR

04/22/2009

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