

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000088897

FILED  
Jan 25, 2010  
Secretary of State

Entity Name: CC&B MUSEUM, LLC

**Current Principal Place of Business:**

1845 ENGLEWOOD ROAD UNIT 890  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

1845 ENGLEWOOD ROAD UNIT 890  
ENGLEWOOD, FL 34223

**New Mailing Address:**

FEI Number: 27-1013907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOELLER, SCOTT D ESQ  
889 NORTH WASHINGTON BLVD.  
SARASOTA, FL 34236 US

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

HODGES, AVRUTIS & FOELLER, P.A.  
889 NORTH WASHINGTON BLVD.  
SARASOTA, FL 34236 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: SCOTT D FOELLER, ESQ

01/25/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FOELLER, SCOTT D  
Address: 889 NORTH WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: MGR  
Name: QUANDT, ROBERT J  
Address: 205 BECKER ROAD  
City-St-Zip: VENICE, FL 34293

Title: MGRM  
Name: T.A. KREBS ARCHITECT INC  
Address: 1460 SOUTH MCCALL ROAD STE 4A  
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGR  
Name: KREBS, CLAY  
Address: 1460 SOUTH MCCALL ROAD STE 4A  
City-St-Zip: ENGLEWOOD, FL 34223

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: SCOTT D FOELLER, ESQ.

MGR

01/25/2010

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