

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000009341

Entity Name: ASTRO CROW, LLC

**FILED**  
**Feb 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2990 GRANDVILLE CIR., APT 304  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

2990 GRANDVILLE CIR., APT 304  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 27-1804530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PARDO, GREGORY E  
2990 GRANDEVILLE CIR.  
APT 304  
OVIEDO, FL 32765 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: PARDO, GREGORY E  
Address: 2990 GRANDEVILLE CIR. APT 304  
City-St-Zip: OVIEDO, FL 32765

Title: MGR  
Name: STABILE, BRIAN  
Address: 2990 GRANDEVILLE CIR. APT 304  
City-St-Zip: OVIEDO, FL 32765

Title: MGR  
Name: WIGHTMAN, SHAUN  
Address: 310 PINESONG DR  
City-St-Zip: CASSELBERRY, FL 32707

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: GREGORY PARDO

MGR

02/24/2012

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