LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2002 8:00 am
Secretary of State
08-29-2002 90081 031 ****50.00

DOCUMENT # L99000004110

1. Entity Name
CRESCENT INN, L.C.

DO NOT WRITE IN THIS SPACE

977051

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2. Principal Place of Business	3. Mailing Address
108 SAND DOLLAR LANE	108 SAND DOLLAR LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SARASOTA, FL	City & State: SARASOTA, FL
Zip: 34242 Country:	Zip: 34242 Country:

4. FEI Number: 65-0952910 — Applied For / Not Applicable

5. Certificate of Status Desired: [X] $5.00 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: MATTHEW P. ELLIS
Street Address (P.O. Box Number is Not Acceptable): 108 SAND DOLLAR LANE
City: SARASOTA FL Zip Code: 34242

8. 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: MATTHEW P. ELLIS 8-23-02
(Signature, typed or printed name of registered agent and title if applicable.) DATE

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DIRECTOR	MATTHEW P. ELLIS	108 SAND DOLLAR LANE	SARASOTA, FL 34242
DIRECTOR	CATHY J. ELLIS	108 SAND DOLLAR LANE	SARASOTA, FL. 34242

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: MATTHEW P. ELLIS 8-23-02 941 3129705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CR2E083B (12/01)