2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002654

Entity Name: CRISPIN PORTER & BOGUSKY LLC

635 N GREENWAY DRIVE

CORAL GABLES, FL 33134

Address:

City-St-Zip:

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
SUITE 300	Y STREET) T GROVE, FL	33133		
Current Mailing Address:			New Mailing Address:	
SUITE 300	Y STREET) T GROVE, FL	33133		
FEI Number:	: 65-1063056	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1395 BRIC 14TH FLO	OOT, JOHN C CKELL AVENUI OR 33131 US			
	named entity se of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both
SIGNATU	RE:			
	Electron	ic Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	PORTER, CHAI	ST., SUNSET ISLAND 3	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () BOGUSKY, ALE 421 HIGHLAND BOULDER, CO	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () HICKS, JEFFRI 7421 SW 53 C MIAMI, FL 331	7	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	MGR ()	Delete ==================================	Title:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: CHUCK PORTER MGR 03/27/2009