

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002448

FILED
May 01, 2006
Secretary of State

Entity Name: CROWNE SOLUTIONS, LLC

Current Principal Place of Business:

1900 CENTURY PLACE
SUITE 100
ATLANTA, GA 303454302 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 29546
ATLANTA, GA 303590546

New Mailing Address:

FEI Number: 54-2088364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEONARD, SALLY
Address: 1900 CENTURY PLACE, STE 100
City-St-Zip: ATLANTA, GA 303454302 US

Title: MGR () Delete
Name: SAVOY, ROBERT
Address: 1900 CENTURY PLACE, STE 100
City-St-Zip: ATLANTA, GA 303454302

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 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: SALLY LEONARD

MGRM

05/01/2006

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