

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002448

**FILED**  
**Apr 29, 2011**  
**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:**

1900 CENTURY PLACE NE  
SUITE 100  
ATLANTA, GA 303454302 US

**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 ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGRM  
Name: LEONARD, SALLY  
Address: 1900 CENTURY PLACE NE, STE 100  
City-St-Zip: ATLANTA, GA 303454302 US

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

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: SALLY LEONARD

MGRM

04/29/2011

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