

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006594

Entity Name: CRESTA INSURANCE, LLC

FILED
Jan 08, 2008
Secretary of State

Current Principal Place of Business:

6855 S. HAVANA ST, #620
CENTENNIAL, CO 80112

New Principal Place of Business:

Current Mailing Address:

6855 S. HAVANA ST, #620
CENTENNIAL, CO 80112

New Mailing Address:

FEI Number: 20-3722979

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: MGR () Delete
Name: RICH, ROBERT
Address: 102 INVERNESS TERRACE EAST #105
City-St-Zip: ENGLEWOOD, CO 80112

Title: MGR () Delete
Name: SHEA, JOHN
Address: 101 2ND ST, #100
City-St-Zip: PETALUMA, CA 94952

Title: MGR () Delete
Name: SUSCO, MIKE
Address: 150 WELLS AVE
City-St-Zip: NEWTON, MA 02459

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RICH, ROBERT
Address: 6855 S HAVANA ST #620
City-St-Zip: CENTENNIAL, CO 80112

Title: MGR (X) Change () Addition
Name: ELDRIDGE, RICK
Address: 6855 S HAVANA ST #620
City-St-Zip: CENTENNIAL, CO 80112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROBERT RICH

MGR

01/08/2008

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