

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M98000001485

**FILED**  
**Feb 28, 2010**  
**Secretary of State**

**Entity Name:** CRR FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

C/O CARL VARBLOW  
5264 DAWES AVE  
ALEXANDRIA, VA 223111404

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CARL VARBLOW  
5264 DAWES AVE  
ALEXANDRIA, VA 223111404

**New Mailing Address:**

**FEI Number:** 54-1920033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GLASSBERG, DAVID M ESQ  
13615 SOUTH DIXIE HWY #114-514  
MIAMI, FL 33176 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:** VARBLOW, CARL R  
**Address:** 5264 DAWES AVENUE  
**City-St-Zip:** ALEXANDRIA, VA 223111404

**Title:** MGRM  
**Name:** VARBLOW, ROLAND C VARBLOW  
**Address:** 5264 DAWES AVENUE  
**City-St-Zip:** ALEXANDRIA, VA 223111404

**Title:** MGRM  
**Name:** VARBLOW, CONRAD R  
**Address:** 21963 HYDE PARK DRIVE  
**City-St-Zip:** ASHBURN, VA 20147

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:** CARL R VARBLOW

MGRM

02/28/2010

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