

2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L25000253718

Entity Name: CRA CAPITAL INVESTMENTS, LLC

Current Principal Place of Business:

520 N SEMORAN BLVD
SUITE 100
ORLANDO, FL 32807-3331

Current Mailing Address:

520 N SEMORAN BLVD
SUITE 100
ORLANDO, FL 32807-3331 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: EDWARD M. ALDEN

04/22/2026

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|---------------------------------|-----------------|---------------------------------|
| Title | MGR | Title | AUTHORIZED REPRESENTATIVE |
| Name | ATKINSON, CARL R. | Name | ALDEN, EDWARD M. |
| Address | 520 N SEMORAN BLVD SUITE 100 | Address | 520 N SEMORAN BLVD SUITE 100 |
| City-State-Zip: | ORLANDO FL 32807-3331 | City-State-Zip: | ORLANDO FL 32807-3331 |
| | | | |
| Title | TRUSTEE | | |
| Name | ATKINSON, CARL R. | | |
| Address | 520 N SEMORAN BLVD SUITE 100 | | |
| City-State-Zip: | ORLANDO FL 32807-3331 | | |

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD M. ALDEN

**AUTHORIZED
REPRESENTATIVE**

04/22/2026

Electronic Signature of Signing Authorized Person(s) Detail

Date