2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2004 8:00 am
Secretary of State
04-06-2004 90030 032 ***158.75

DOCUMENT # 417389

1. Entity Name
SUNCREST HOMES, INC.

Principal Place of Business	Mailing Address
OFFICE 715 OAKDALE AVE BROOKSVILLE FL 34601 US	OFFICE 715 OAKDALE AVE BROOKSVILLE FL 34601 US

MOORE CR2E034 (11/03)

2. Principal Place of Business		3. Mailing Address	
622 ERIN WAY		622 ERIN WAY	
Suite, Apt. #, etc.: 622 ERIN WAY		Suite, Apt. #, etc.	
City & State: Brooksville, FL.		City & State: Brooksville, FL.	
Zip: 34601	Country: USA	Zip: 34601	Country: USA

4. FEI Number 59-1453009 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, EDGAR J JR
404 SHARON STREET
BROOKSVILLE FL 34601

7. Name and Address of New Registered Agent

Name: Edgar J. Cook, Jr.
Street Address (P.O. Box Number is Not Acceptable): 622 Erin Way
City: Brooksville, FL Zip Code: 34601

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] / Edgar J. Cook, Jr. / PRESIDENT / 03/30/2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COOK, EDGAR J JR 404 SHARON STREET BROOKSVILLE FL 34601	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COOK, EDGAR J. JR. 622 ERIN WAY BROOKSVILLE, FL. 34601	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CLARK, VICKIE C 622 ERIN WAY BROOKSVILLE FL 34601	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] / Edgar J. Cook, Jr. 03/30/2004 (352) 754-4593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #