## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State **DOCUMENT # P03000008611** 05-02-2005 90385 047 \*\*\*158.75 FRANK WINSTON CRUM INSURANCE, INC. Principal Place of Business Mailing Address 14012304 100 S. MISSOURI AVE. 100 S. MISSOURI AVE. CLEARWATER, FL 33756 CLEARWATER, FL 33756 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite Apt #, etc. 02212005 Chg-P CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 06-1683641 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHIEF FINANCIAL OFFICER Street Address (P.O. Box Number is Not Acceptable) P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399, City Zip Code 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 SIGNATURE\_\_\_\_\_\_Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. D TITLE ☐ Delete TITLE Change Addition CRUM, FRANK W SR NAME NAME SEE ATTACHED 3040 GULF TO BAY BLVD SUITE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33759 CITY-ST-ZIP В TITLE ☐ Delete TITLE Change Addition CRUM, FRANK W JR NAME NAME STREET ADDRESS 3040 GULF TO BAY BLVD SUITE 200 STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33759 CITY-ST-ZIP ☐ Delete TITLE **Change** TITLE Addition CRITELLI, CAROL A NAME MAME 3040 GULF TO BAY BLVD SUITE 200 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CLEARWATER, FL 33759 CITY-ST-ZIP ☐ Delete TITLE ☐ Channe ☐ Addition TITLE MEEK, JOHN H JR NAME NAME STREET ADDRESS STREET ADDRESS 51 CARLOUEL DR. CITY-ST-ZIP CLEARWATER, FL 33767 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE DIXON, JOHN R NAME NAME STREET ADDRESS 15820 BEREA DR STREET ADDRESS ODESSA, FL 33556 CITY-ST-ZIP CITY-ST-7IP Delete TITLE Change Change ☐ Addition TITLE BOALES, BRIAN M NAME STREET ADDRESS 2141 HIDDEN MILL RUN STREET ADDRESS SNELLVILLE, GA 30078 CITY-ST-ZIP

12. I horeby certify that the information supplied with this filling 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 an address, with all other like empowered.

**SIGNATURE:** 

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/05 727-799-1150

**FILED** 

May 02, 2005 8:00 am

Daytime Phone #

ATTACHMENT

. 2005 For Profit Corporation Annual Report

# P03000008611

Frank Winston Crum Insurance, Inc. 2004 For Profit Corporation Annual Report

11. Additions/Changes to Officers and Directors

CHANGE TITLE

NAME

D/V

STREET ADRESS

CITY-ST-ZIP

CITY-ST-ZIP

CRUM, FRANK W SR 100 S. MISSOURI AVE. CLEARWATER, FL 33756

CHANGE TITLE

C/S

NAME STREET ADRESS CRUM, FRANK W JR 100 S. MISSOURI AVE. CLEARWATER, FL 33756

CHANGE TITLE

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NAME STREET ADRESS CRITELLI, CAROL A 100 S. MISSOURI AVE.

CITY-ST-ZIP

**CLEARWATER, FL 33756** 

CHANGE TITLE

NAME

BOALES, BRIAN M

STREET ADRESS CITY-ST-ZIP

100 S. MISSOURI AVE. CLEARWATER, FL 33756

CHANGE TITLE

Ε .

D/T/V

D/P

NAME STREET ADRESS CARR, JAMES M

CITY-ST-ZIP

100 S. MISSOURI AVE. CLEARWATER, FL 33756