


2008 FOR PROFIT CORPORATION ANNUAL REPORT

05-01-2008 90208 030 ***150.00
P04000167284

DOCUMENT # P04000167284

1. Entity Name
CRISWELL TILE, INC



FILED
08 JUN - 9 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**29190 STATE ROAD 70 EAST
MYAKKA CITY, FL 34251 US**

Mailing Address
**29190 STATE ROAD 70 EAST
MYAKKA CITY, FL 34251 US**



2. Principal Place of Business No P.O. Box #
503 31st Ave E

3. Mailing Address
503 31st Ave E

Suite, Apt. #, etc.

02292008 Chg-P CR2E034 (12/08)

City & State
Bradenton FL

City & State
Bradenton FL

Zip
34208

Country
Manatee

4. FFI Number
11-3737858

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 the obligations of registered agent.

SIGNATURE **Keith Criswell** DATE **4-28-08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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	PSTD CRISWELL, KEITH 1114-2ND AVE EAST BRADENTON, FL 34208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **Keith Criswell** DATE **4-28-08**

Signature and typed or printed name of signing officer or director

Handwritten initials/signature