2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 191803

Entity Name: DREWCREST INC

FILED Apr 17, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	REST AVE., N. TER, FL 33755	US			
Current Mailing Address:			New Maili	New Mailing Address:	
	REST AVE., N. TER, FL 33755	US			
FEI Number:	59-6059825	FEI Number Applied For () FEI Nu	umber Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
HALL, DONALD R 2900 US HWY 19 N STE 402 CLEARWATER, FL 34621 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:					
Electronic Signature of Registered Agent				Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () DO RHODES, BILL 1385 DREW ST. CLEARWATER, F		Title: Name: Address: City-St-Zip:	PD (X) Change () Addition GERRY, BALDWIN 1385 DREW ST. CLEARWATER, FL 33755	
Title: Name: Address: City-St-Zip:	VPD () DO BARRIENTOS, ER 1385 DREW ST CLEARWATER, F	NESTO	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () DO MANNIK, CAROL A 1385 DREW ST. CLEARWATER, F	ANN	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition MANNIX, PAUL 1385 DREW ST. CLEARWATER, FL 33755	
Title: Name: Address: City-St-Zip:	D () DO BALDWIN, JERRY 1385 DREW ST CLEARWATER, F	,	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LONG, WREN 1385 DREW ST CLEARWATER, FL 33755	
Title: Name: Address: City-St-Zip:	TD () DO DILLON, THOMAS 120 N HILLCREST CLEARWATER, F	S ΓAVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DELEAKE, BOB 120 HILLCREST A CLEARWATER, F	NVE N	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERRY BALDWIN PD 04/17/2007