2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 220556

Entity Name: CRYSTAL RIVER QUARRIES INC

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7040 N. SUNCOAST BLVD. 7040 N. SUNCOAST BLVD

PO BOX 216 CRYSTAL RIVER, FL 34428 US CRYSTAL RIVER, FL 344230216 US

Current Mailing Address: New Mailing Address:

7040 N. SUNCOAST BLVD. P.O. BOX 216

P.O. BOX 216 CRYSTAL RIVER, FL 344230216 US CRYSTAL RIVER, FL 344230216 US

FEI Number: 59-0868861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLITZ, FRANK J., JR
7040 N. SUNCOAST BLVD.
PO BOX 216

COLITZ, FRANK J JR
7040 N. SUNCOAST BLVD.
CRYSTAL RIVER, FL 34428 US

PO BOX 216 CRYSTAL RIVER, FL 34428 US CRYSTAL RIVER, FL 34428 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: FRANK J COLITZ JR 04/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

Title:

OFFICERS AND DIRECTORS:

() Delete

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:COLITZ, FRANK J., JRName:COLITZ, FRANK J JRAddress:7040 N. SUNCOAST BLVD.Address:7040 N. SUNCOAST BLVD.City-St-Zip:CRYSTAL RIVER, FL 34428City-St-Zip:CRYSTAL RIVER, FL 34428

Title: STD () Delete Title: STD (X) Change () Addition Name: COLITZ, EDWARD Name: COLITZ, EDWARD F

Address: 7040 N. SUNCOAST BLVD. Address: 7040 N. SUNCOAST BLVD. City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: CRYSTAL RIVER, FL 34428

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 COLITZ, MICHELLE
 Name:
 COLITZ, MICHELLE F

 Address:
 7040 N. SUNCOAST BLVD.
 Address:
 7040 N. SUNCOAST BLVD.

 City-St-Zip:
 CRYSTAL RIVER, FL 34428
 City-St-Zip:
 CRYSTAL RIVER, FL 34428

I hereby certify that the information supplied with this filing does not qualify 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: FRANK J COLITZ JR PD 04/23/2009