

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90122 024 ***150.00

DOCUMENT # 537738

1. Entity Name
FLORIDA CROWN DEVELOPMENT CORP.



Principal Place of Business
**3600 VINELAND RD
STE 101
ORLANDO, FL 32811 US**

Mailing Address
**3600 VINELAND RD
STE 101
ORLANDO, FL 32811 US**

DO NOT WRITE IN THIS SPACE

400400



02152006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1784609	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**BARKER, EARL M., JR.
334 EAST DUVAL ST.
JACKSONVILLE, FL 32202**

**DO NOT WRITE
IN THIS SPACE**

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, 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, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDST WEBB, WILLIAM C JR. 1300 NW 167TH ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEBB, DANIEL B 3600 VINELAND RD STE 101 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD BARKER, EARL M., JR. 334 E. DUVAL ST. JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Daniel B Webb*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-06

Date

407-841-1414

Daytime Phone #