



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 08:00 AM
Secretary of State

DOCUMENT # 686275 1. Entity Name CRILLY'S ACCOUNTING SERVICE, INC.	
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Principal Place of Business 11200 102ND AVE. UNIT # 97 SEMINOLE, FL 33778 US	Mailing Address 11200 102ND AVE UNIT # 97 SEMINOLE, FL 33778 US
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DO NOT WRITE IN THIS SPACE


02052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2022086	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CRILLY, JAMES A
11200 102ND AVE.
UNIT # 97
SEMINOLE, FL 33778**

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRILLY, JAMES A PD 8261 141ST STREET N. SEMINOLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRILLY, JAMES A 11200 102 AVE UNIT 97 SEMINOLE, FL 33778
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04/12/07-80019-003 150.00

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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:  **JAMES A. CRILLY PRES/DIR** **727-393-7295**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone