

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759178

FILED
Apr 11, 2012
Secretary of State

Entity Name: COLONIAL CROWN MANOR DISPOSAL SYSTEMS, INC.

Current Principal Place of Business:

5500 N OCEAN BLVD
C/O MS GAIL AASKOV
OCEAN RIDGE, FL 33435

New Principal Place of Business:

Current Mailing Address:

5011 N OCEAN BLVD
C/O MS GAIL AASKOV
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: 59-2149685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAIL, AASKOV A MANAGER
C/O MANAGEMENT SERVICES
5011 N OCEAN BLVD
OCEAN RIDGE, FL 33435 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: COX, JAMES
Address: 5505 N. OCEAN BLVD. FAIRFOX 204
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DP
Name: PALLARIA, DOMENICK
Address: 5530 N. OCEAN BLVD.
City-St-Zip: OCEAN RIDGE, FL

Title: DT
Name: PIZZI, MICHAEL
Address: 5550 N. OCEAN BLVD. #209
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DS
Name: SZEPESI, ATTILA
Address: 5540 N. OCEAN BLVD. #114
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D
Name: KNEHR, DOROTHY
Address: 5505 N. OCEAN BLVD., RICHMOND 202
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DVP
Name: DOYLE, KEVIN
Address: 5500 OLD OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOMINICK PALLARIA

P

04/11/2012

Electronic Signature of Signing Officer or Director

Date