2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 27, 2006 8:00 am Secretary of State **DOCUMENT #768560** 01-27-2006 90030 039 ****70.00 CREST RIDGE GARDENS SECURITY PATROL, INC. Principal Place of Business Mailing Address 4806 - 4808 PHOENIX AVENUE 4806 - 4808 PHOENIX AVENUE HOLIDAY, FL 34690 HOLIDAY, FL 34690 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072006 Chg-NP CR2E037 (11/05) 4. FEI Number 59-2260171 City & State City & State Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WELCH, THEODORE 5021 PHOENIX AVE. Street Address (P.O. Box Number is Not Acceptable) HOLIDAY, FL 34690 City Zip Code .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 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ĐΖ TITLE Delete TITLE Addition ARSENAULT, RONALD 4927 COLONNADE AVE. **BUERGER, JERRY LEE** NAME NAME STREET ADDRESS 1543 SENTINEL STREET STREET ADDRESS CITY-ST-ZIP HOLIDAY, FL 34690, CITY-ST-ZIP OLIDAY FL 34690 ☐ Delete TITLE ☐ Change ☐ Addition WELCH, THEODORE NAME NAME STREET ADDRESS 5021 PHOENIX AVE. STREET ADDRESS CITY-ST-78P HOLIDAY, FL 34690 CITY-SY-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CROSS, IRENE NAME STREET ADDRESS 5021 PHOENIX AVE. STREET ADDRESS CITY-ST-78P HOLIDAY, FL 34690 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BUERGER, CARL NAME NAME STREET ADDRESS 1543 SENTINAL ST. STREET ADDRESS CITY-ST-7IP HOLIDAY, FL 34690 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GERLACH, BILLIE ANN NAME 4844 MIRAGE AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLIDAY, FL 34690 CITY-ST-ZIP TITLE ☐ Delete TITI F Change ☐ Addition NAME BURR, WALTER NAME STREET ADDRESS 1438 EXCALIBUR STREET STREET ADDRESS CITY-ST-7IP HOLIDAY, FL 34690 CITY-ST-ZIP

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 cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED