


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90041 026 \*\*\*158.75

**DOCUMENT # 818558**  
 1. Entity Name  
 CRI RESOURCES, INC.



Principal Place of Business  
 900 WILSHIRE BLVD., STE. 1520  
 LOS ANGELES, CA 90017-4716

Mailing Address  
 900 WILSHIRE BLVD., STE. 1520  
 LOS ANGELES, CA 90017-4716

40064375



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip  
 Country

04102007 Chg-P CR2E034 (12/06)

4. FEI Number  
 31-0244320

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 CT CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C/D  Delete  
 NAME FENNING, WILLIAM M.  
 STREET ADDRESS 900 WILSHIRE BLVD., STE. 1520  
 CITY-ST-ZIP LOS ANGELES, CA 900174716

TITLE CEO/D  Change  Addition  
 NAME WILLIAM M FENNING  
 STREET ADDRESS 900 WILSHIRE BLVD STE 1520  
 CITY-ST-ZIP LOS ANGELES CA 90017-4716

TITLE P/D  Delete  
 NAME FENNING, WILLIAM M  
 STREET ADDRESS 900 WILSHIRE BLVD., STE. 1520  
 CITY-ST-ZIP LOS ANGELES, CA 900174716

TITLE  Change  Addition  
 NAME VACANT  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE V/D  Delete  
 NAME MORGAN, DAVID T  
 STREET ADDRESS 900 WILSHIRE BLVD., STE. 1520  
 CITY-ST-ZIP LOS ANGELES, CA 900174716

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE S  Delete  
 NAME AHEARN, NANCY  
 STREET ADDRESS 900 WILSHIRE BLVD., STE. 1520  
 CITY-ST-ZIP LOS ANGELES, CA 900174716

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE VPD  Delete  
 NAME PRIOR, WILLIAM D  
 STREET ADDRESS 900 WILSHIRE BLVD, STE 1520  
 CITY-ST-ZIP LOS ANGELES, CA 900174716

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 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 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: William D Prior V/D Date: 4/12/07 Daytime Phone #: 213/624-8161  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR