

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004880

Entity Name: CEDARCRESTONE, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1255 ALDERMAN DR.
ALPHARETTA, GA 30005

New Principal Place of Business:

Current Mailing Address:

1255 ALDERMAN DR.
ALPHARETTA, GA 30005

New Mailing Address:

FEI Number: 58-2548193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YONKERS, CAL
Address: 1790 VILLA RICA RD.
City-St-Zip: POWDER SPRINGS, GA 30127

Title: AT () Delete
Name: WORTHINGTON, CHRISTY
Address: 1072 GRASSMEADE WAY
City-St-Zip: SNELLVILLE, GA 30078

Title: S () Delete
Name: MCCORMACK, SEAN
Address: 417 SOUTH GILPIN
City-St-Zip: DENVER, CO

Title: AS () Delete
Name: SIMMONS, PAUL
Address: 406 OWEN STREET
City-St-Zip: CHARLESTON, SC 29414

Title: VP (X) Delete
Name: MCCORMACK, PATRICK S
Address: 417 SOUTH GILPIN
City-St-Zip: DENVER, CA 80209 US

Title: T (X) Delete
Name: FEES, BRIAN
Address: 3695 SCHOONER RIDGE
City-St-Zip: ALPHARETTA, GA 30005 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: YONKERS, CAL PRES/DI
Address: 1790 VILLA RICA RD.
City-St-Zip: POWDER SPRINGS, GA 30127

Title: VP/D (X) Change () Addition
Name: BOYER, NEIL VP/D
Address: 4 WHITE OAK CT.
City-St-Zip: ALGONQUIN, IL 60102

Title: S/T (X) Change () Addition
Name: FEES, BRIAN E SEC/TR
Address: 3695 SCHONNER RIDGE
City-St-Zip: ALPHARETTA, GA 30005

Title: DIR (X) Change () Addition
Name: JON, MAULTON DIR
Address: 1255 ALDERMAN DR
City-St-Zip: ALPHARETTA, GA 30005

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN E FEES

S/T

05/01/2006

Electronic Signature of Signing Officer or Director

Date