

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005029

FILED
Feb 16, 2007
Secretary of State

Entity Name: JAMES CRYSTAL CAVE CREEK, INC.

Current Principal Place of Business:

6600 N ANDREWS AVE
SUITE 160
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

6600 N ANDREWS AVE
SUITE 160
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 54-2079457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLIARD, JAMES W
6600 N ANDREWS AVE SUITE 160
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

HINDES, RICHARD C
6600 N ANDREWS AVE SUITE 160
FORT LAUDERDALE, FL 33309 US

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: RICHARD C HINDES

02/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPVS () Delete
Name: HILLIARD, JAMES C
Address: 6600 N ANDREWS AVE STE 160
City-St-Zip: FT LAUDERDALE, FL 33309

Title: VT () Delete
Name: HINDES, RICHARD C
Address: 6600 N ANDREWS AVE, SUITE 160
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: V () Delete
Name: HILLIARD, JAMES W
Address: 6600 NW ANDREWS AVE SUITE 160
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RICHARD C HINDES

VT

02/16/2007

Electronic Signature of Signing Officer or Director

Date