

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F51059

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: CRESTWOOD BUILDERS, INC.

## Current Principal Place of Business:

2550 N.E. 36TH AVENUE, SUITE F  
OCALA, FL 32670

## New Principal Place of Business:

2550 N.E. 36TH AVENUE, SUITE F  
OCALA, FL 34470

## Current Mailing Address:

2550 N.E. 36TH AVENUE, SUITE F  
OCALA, FL 32670

## New Mailing Address:

2550 N.E. 36TH AVENUE, SUITE F  
OCALA, FL 34470

FEI Number: 59-2142049

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FINN, MICHAEL A.  
2550 N.E. 36TH AVENUE, SUITE F  
OCALA, FL 32679 US

## Name and Address of New Registered Agent:

FINN, MICHAEL A.  
2550 N.E. 36TH AVENUE, SUITE F  
OCALA, FL 34470 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:

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FINN, MICHAEL A.,  
Address: 2550 NE 36TH AVE., F  
City-St-Zip: OCALA, FL

Title: ST ( ) Delete  
Name: FINN, DIANE C.,  
Address: 2550 NE 36TH AVE., F  
City-St-Zip: OCALA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FINN, MICHAEL A.,  
Address: 2550 NE 36TH AVE., F  
City-St-Zip: OCALA, FL 34470

Title: ST (X) Change ( ) Addition  
Name: FINN, DIANE C.,  
Address: 2550 NE 36TH AVE., F  
City-St-Zip: OCALA, FL 34470

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL A. FINN

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

Date