2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J65429 CREWSVILLE SWEETWATER, INC.



FILED Jan 24, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

220 S COMM SEBRING, FL		P O BOX 3346 SEBRING, FL 33871	····				
D	O NOT WRITE	CE	01042007 4. FEI Numbe 59-2804	No Chg-P	CR2E0	34 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
	IMERCE FL 33870	DO NOT WRITE IN THIS SPACE					
						ida. I am OATE	familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution.			cing \$5	.00 May Be led to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF D KAHN, MARVIN 220 S COMMERCE AVE SEBRING, FL 33870	RECTORS :			U000 01/26/0	00600 7–800	282 104-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP							

12. Thereby certify that the information supplied with this filling 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:X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR