2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K31852

FILED Jan 20, 2009 Secretary of State

Entity Name: CRYSTAL LAKE EXECUTIVE PARK, INC.

| urrent P | rincipal Place o | DI DUSINESS: | New Principal Place | or business: |
|--|---|---|---------------------------------------|---|
| :1005 O'B BROVELA | RIEN RD ND, FL 34736 | US | | |
| urrent M | lailing Address | : | New Mailing Addres | ss: |
| :1005 O'B ROVELA | RIEN RD ND, FL 34736 | US | | |
| El Number | : 58-1811734 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| lame and | l Address of Cเ | ırrent Registered Agent: | Name and Address | of New Registered Agent: |
| | , SARA TLEY PARK CIR | 2 | | |
| RLANDO | | US | | |
| he above |), FL 32819 | | ourpose of changing its registere | ed office or registered agent, or both, |
| he above |), FL 32819 named entity sue of Florida. | | ourpose of changing its registere | ed office or registered agent, or both, |
| he above the State | D, FL 32819 Inamed entity sue of Florida. RE: | | | ed office or registered agent, or both, Date |
| The above of the State | o, FL 32819 onamed entity subset of Florida. RE: Electronic | ມbmits this statement for the ເ | | |
| The above the State SIGNATUI | o, FL 32819 onamed entity subset of Florida. RE: Electronic | ubmits this statement for the positions of the positions of Registered Agricust Fund Contribution (). | ent | |
| The above the State SIGNATUI | o, FL 32819 named entity sue of Florida. RE: Electronic mpaign Financing | ubmits this statement for the position of Registered Age Trust Fund Contribution (). ORS: Delete ER, ERD | ent | Date |
| The above to the State SIGNATUR SIGNATUR SIECTION CAR DFFICERS itle: lame: ddress: | on paign Financing S AND DIRECT SD () EMICHAELI, ASHE 225 HEATHCOTE SCARSDALE, NY | ubmits this statement for the position of the position of Registered Age Trust Fund Contribution (). ORS: Delete ER, ERD Oelete EPH, ER | ADDITIONS/CHANG Title: Name: Address: | Date ES TO OFFICERS AND DIRECTOR |

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: SARA MICHAELI VP 01/20/2009