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PROFIT CORPORATION ANNUAL REPORT

1997



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SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

(96/6)

330 .. 3594888

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K59763

(8)

CRESCENT INVESTMENT COMPANY

Principal Place of Business Mailing Address *** GEORGE C. MCLARRY % GEORGE C. MCLARRY** 301 NORTH FERNCREEK AVE 301 NORTH FERNCREEK AVE ORLANDO FL 32803-5400 ORLANDO FL 32803 3. Date Incorporated or Qualified 3a. Date of Last Report 01/20/1989 04/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For SAME SAME 21 59-2927337 26 Not Applicable Suite Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 **Trust Fund Contribution** Added to Fees Country Zip Zin Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCLARRY, GEORGE C. 301 NORTH FERNCREEK AVE. 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL FL 32803 83 84 City Zip Code 65 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE HILE 1.1 TITLE ☐ Change ☐ Addition NISER, JAMAL NAME 1.2 NAME 1350 BITTERSWEET DR STREET ADDRESS 1.3 STREET ADDRESS 44484 WARREN OH CHTY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIE 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIE 3.4. CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE Addition TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-2IP 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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