2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State DOCUMENT # L05000047515 01-13-2006 90034 036 ****50.00 CREST PROFESSIONAL FINANCIAL SERVICES, LLC Principal Place of Business Mailing Address 701 BRITTANY LAKES LANE 701 BRITTANY LAKES LANE ORLANDO, FL 32828 ORLANDO, FL 32828 2. Principal Place of Business 701 Crest Pines 3. Mailing Address 701 Crest Pines Orive Dave. Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (11/05) 01082006 Chg-LLC City & State 4. FEI Number Applied For FL fl. Not Applicable 32828 Country Countr \$5.00 Additional USA 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Law Offices of Scott L. Pochin PODVIN, SCOTT L Street Address (P.O. Box Number is Not Acceptable) 701 BRITTANY LAKES LANE ORLANDO, FL 32828 Kines C1 251 City Zip Code 37828 Delando FL 8. The above nam this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations SIGNATURE name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE TITI F MGR. X) Change ☐ Addition Scott L. Poduin NAME PODVIN, SCOTT L NAME 701, Cirst Pines Drive 701 BRITTANY LAKES LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32828 CITY-ST-ZIP MGR mn F Detete ☐ Change ☐ Addition FREED, SHEILAKAY NAME NAME STREET ADDRESS 701 BRITTANY LAKES LANE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32828 CITY-ST-ZIP ☐ Defete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP tm F Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP I hereby certify that the information indicated on this report is true and limited liability company or the research. n sopplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information that any signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the ceiver it rudgee empowered to execute this report as required by Chapter 608, Florida Statutes. 7447-737-4442

FILED

Jan 13, 2006 8:00 am