2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L31289

1. Entity Name

SUNCREST REALTY ASSOCIATES, INC.



FILED Feb 27, 2006 08:00 AM Secretary of State

Principal Place of Business

950 N. COLLIER BLVD

SUITE 400

MARCO ISLAND, FL 34145

Mailing Address

950 N. COLLIER BLVD

SUITE 400

MARCO ISLAND, FL 34145

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02222006 No Chg-P

CR2E034 (11/05)

4. FEt Number 65-0166649

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ASDOURIAN, ARTHUR 1036 S. COLLIER BLVD SUITE 604 MARCO ISLAND, FL 33937

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE	Signature, typed or printed name of registered agent and title t	f applicable. (NOTE: Flegistered	Agent signature	required when rematating)	CATE				
	E NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$350.00	Election Campaign Financ Trust Fund Contribution.	cing 🛮	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST ASDOURIAN, ARTHUR 950 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145								
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U0000450448 U3/10/06-80006-024 150.00				
TITLE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · · · · -				
TITLE NAME STREET ADDRESS CITY-ST-ZP				•					
12. I hereby 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 suppligmental report is true and advantate 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 received or trustee employered 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 official times the provided by the same legal effect as if made under oath; that I am an officer or director of the corporation or the received or trustee and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all officer of the corporation.									

SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING OFFICER ON DIRECTOR Date Doyume Phone #

ARTHUR J. ASDOURIAN