

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 14, 2005 08:00 AM
Secretary of State**

DOCUMENT # L73459

1. Entity Name
CRESTLINE PRODUCTS, INC.



Principal Place of Business
P.O. BOX 2108
ORLANDO, FL 32802-2108 US

Mailing Address
P.O. BOX 2108
ORLANDO, FL 32802-2108 US

DO NOT WRITE IN THIS SPACE



03062005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3007248

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CUNNINGHAM, THOMAS W.
3580 EMERYWOOD LANE
ORLANDO, FL 32812**

**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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
CUNNINGHAM, THOMAS W.
3580 EMERYWOOD LANE
ORLANDO, FL 32812**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
CUNNINGHAM, PENNY H.
3580 EMERYWOOD LANE
ORLANDO, FL 32812**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
CASSICK, SANDRA C.
2520 WOODCOTE TERR
PALM HARBOR, FL 34685**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
ALLISON, DEBORAH C
4101 TERIWOOD AVE
ORLANDO, FL 32812**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000262307
03/14/05-80048-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 my address, with all other like empowered.

SIGNATURE: THOMAS W. CUNNINGHAM, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/11/2005
Date

407 859 6428
Daytime Phone #