

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L79317

FILED  
Apr 04, 2009  
Secretary of State

Entity Name: CRICKET SHOP CORPORATION

## Current Principal Place of Business:

28210 OLD 41 RD #309  
BONITA SPRINGS, FL 34135 US

## New Principal Place of Business:

## Current Mailing Address:

28210 OLD 41 RD #309  
BONITA SPRINGS, FL 34135 US

## New Mailing Address:

FEI Number: 65-0197290      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, JEFFREY J.  
28210 OLD 41 RD #309  
BONITA SPRINGS, FL 34135 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JOHNSON, WILLIAM D  
Address: 22674 LAKEVIEW  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: SD ( ) Delete  
Name: JOHNSON, JEFFREY J.  
Address: 28730 DIAMOND DR  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: TD ( ) Delete  
Name: COX, DAWN JOHNSON  
Address: 1989 IMPERIAL GOLF COURSE BLVD.  
City-St-Zip: NAPLES, FL

Title: PD ( ) Delete  
Name: COX, DAVID B.  
Address: 1989 IMPERIAL GOLF COURSE BLVD  
City-St-Zip: NAPLES, FL 34110

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: JOHNSON, JEFFREY J.  
Address: 28730 DIAMOND DR #202  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEFF JOHNSON

SD

04/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date