2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # M62142

1. Entity Name
CRC HOLDINGS, INC.

Principal Place of Business	Mailing Address
825 BERKSHIRE BLVD SUITE 200 WYOMISSING, PA 19610 US	825 BERKSHIRE BLVD SUITE 200 WYOMISSING, PA 19610 US

DO NOT WRITE IN THIS SPACE

03292004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0011722
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BROCHIN, ROBERT M
200 S. BISCAYNE BLVD., #5300
MIAMI, FL 33131

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000155170
05/05/04-80026-006 300.00

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	CARLINO, PETER
STREET ADDRESS	825 BERKSHIRE BLVD
CITY-ST-ZIP	WYOMISSING, PA 19610
TITLE	STD
NAME	IPPOLITO, ROBERT
STREET ADDRESS	825 BERKSHIRE BLVD
CITY-ST-ZIP	WYOMISSING, PA 19610
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 an address, with all other like empowered.

SIGNATURE: Robert Ippolito 4/15/04 610-378-8394
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Robert S. Ippolito