2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M96938

FILED May 01, 2009 Secretary of State

Entity Name: CREST BUSINESS MACHINES OF PENSACOLA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	AKE DRIVE DLA, FL 32507	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	REST BUSINESS MACHINES STAR LAKE DRIVE				
PENSACC	DLA, FL 32507	US			
FEI Number	: 59-2909464	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MAYBERF	RY, DONALD R	PRES			
3 STAR LAKE DRIVE PENSACOLA, FL 32507 US					
LINOACC)LA, I L 32301	00			
	named entity s of Florida.	ubmits this statement for the	purpose of changing its registered	I office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
		(2)(b), F.S., the corporation did n Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:					
ritie:	DP ()	Delete	Title:	() Change () Addition	
Name:	MAYBERRY, DO	DNALD R.	Name:	() Change () Addition	
ntie: Name: Address: City-St-Zip:	` '	DNALD R. RIVE		() Change () Addition	
Name: Address:	MAYBERRY, DO 3 STAR LAKE D PENSACOLA, FI	DNALD R. RIVE	Name: Address: City-St-Zip:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip: Title: Name:	MAYBERRY, DO 3 STAR LAKE D PENSACOLA, FI T () MAYBERRY, LE	DNALD R. RIVE L 32507 Delete	Name: Address: City-St-Zip: Title: Name:	`,	
Name: Address: City-St-Zip: Title:	MAYBERRY, DO 3 STAR LAKE D PENSACOLA, FI T ()	ONALD R. RIVE L 32507 Delete ONA	Name: Address: City-St-Zip: Title:	· , · · · · · · · · · · · · · · · · · ·	
Name: Address: City-St-Zip: Title: Name: Address:	MAYBERRY, DO 3 STAR LAKE D PENSACOLA, FI T () MAYBERRY, LE 3 STAR LAKE	ONALD R. RIVE L 32507 Delete ONA	Name: Address: City-St-Zip: Title: Name: Address:	· , · · · · · · · · · · · · · · · · · ·	
Name: Address: City-St-Zip: Title: Name: Address:	MAYBERRY, DO 3 STAR LAKE D PENSACOLA, FI T () MAYBERRY, LE 3 STAR LAKE	ONALD R. RIVE L 32507 Delete ONA	Name: Address: City-St-Zip: Title: Name: Address:	`, •	

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: DONALD R. MAYBERRY PRES 05/01/2009