2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Jan 24, 2008 8:00 am DOCUMENT # N05000003539 **Secretary of State** CRENSHAW GUILD, INC. 01-24-2008 90040 048 ****61.25 Principal Place of Business Mailing Address 8440 WINTER GARDEN - VINELAND RD P 0 BOX 1159 WINDERMERE, FL 34786 ORLANDO, FL 32836 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 305 Beulah Rd. Suite, Apt. #, etc. 01142008 Chq-NP CR2E037 (12/06) 4. FEI Number 20-2631233 City & State City & State Applied For Winter Garden Not Applicable Žip Country \$8.75 Additional 5. Certificate of Status Desired USA 7. Name and Address of New Registered Agent-6. Name and Address of Current Registered Agent CROSBY, ELENA I Street Address (P.O. Box Number is Not Acceptable) 14105 HAMPSHIRE BAY CIR WINTER GARDEN, FL. 34787 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Due by May 4,2008 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 FFICERS AND DIRECTORS 10 PRES Delete TITLE Pries. TITLE COOK, KATHRYN Anita G. Jones NAME NAME 11232 MACAW COURT STREET ADDRESS STREET ADDRESS 1135 Kelso Bird. CITY-ST-ZIP WINDERMERE, FL 34786 CITY-ST-71P Windermere, FL 34786 Change Addition ☑ Delete TITLE TITLE Tami Barrera SHEIBER, SANDRA NAME NAME 1324 Vic Kay Court 10213 LOUTH COURT STREET ADDRESS STREET ADORESS Winter Garden, Fr 34787 ORLANDO, FL 32836 CITY-ST-7IP CITY-ST-ZIP TITLE ∠ Change TILLE ☐ Delete 8741 Crestgate CR. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P Delete TITLE NAME NAME Michele Ruichert STREET ADDRESS 1343 Lake Whitney Pr. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Windermere, FL 34786 ☐ Addition ☐ Defete TITL F ππε NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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.

FILED

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