

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004476

FILED  
Jun 15, 2012  
Secretary of State

**Entity Name:** CRESCENT FOUNDATION INCORPORATED

**Current Principal Place of Business:**

933 GRAND CANYON DRIVE  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

933 GRAND CANYON DRIVE  
VALRICO, FL 33594

**New Mailing Address:**

FEI Number: 20-5701768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOUNT, ZANNIE  
933 GRAND CANYON DRIVE  
VALRICO, FL 33594 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SHERWOOD, PRINCE  
Address: 5221 BAYSHORE BLVD. # 48  
City-St-Zip: TAMPA, FL 33611

Title: VP  
Name: MOUNT, ZANNIE  
Address: 933 GRAND CANYON DRIVE  
City-St-Zip: VALRICO, FL 33611

Title: S  
Name: CARROLL, GREGORY  
Address: 1440 AUDUBON TRACE APT 1204  
City-St-Zip: TAMPA, FL 33613

Title: T  
Name: WILLIAMS, ANSON  
Address: 11500 SUMMIT WEST BLVD, APT. 46A  
City-St-Zip: TAMPA, FL 33617

Title: BM  
Name: DOVE, MICHAEL  
Address: 3602 E GROVE STREET  
City-St-Zip: TAMPA, FL 33610

Title: BM  
Name: JOHNSON, CYNTHIA DR.  
Address: 15624 EASTBOURN DR  
City-St-Zip: ODESSA, FL 33556

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PRINCE SHERWOOD

P

06/15/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date