## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49709

Entity Name: CRIMINON INC.

FILED May 02, 2009 Secretary of State

Littly Nai	ne. Criminon inc.	
Current P	rincipal Place of Business:	New Principal Place of Business:
107 1/2 N. GREENWOOD AVE N CLEARWATER, FL 33755		612 S LINCOLN AVE CLEARWATER, FL 33756
Current Mailing Address:		New Mailing Address:
PO BOX 7	727 ATER, FL 33758	
	59-3132503 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation did n	FEI Number Not Applicable ( ) Certificate of Status Desired ( ) not receive the prior notice.
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
ZG CONSULTING, LLC 3000 BAYPORT DRIVE SUITE 800 TAMPA, FL 33607 US		BROUGHTON, SUSAN DIR 612 S LINCOLN AVE CLEARWATER, FL 33756 US
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATURE: SUSAN BROUGHTON		05/02/2009
	Electronic Signature of Registered Ag	gent Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D ( ) Delete BALVIN, PAT 2357 STAG RUN BLVD. CLEARWATER, FL 33765	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete ZWAN, JUNE B PO BOX 2944 CLEARWATER, FL 33757	Title: D (X) Change ( ) Addition Name: BROUGHTON, SUSAN E Address: 1910 SANDPIPER DR City-St-Zip: CLEARWATER, FL 33764
Title: Name: Address: City-St-Zip:	D ( ) Delete EASTON, DICK PO BOX 7727 CLEARWATER, FL 33758	Title: D (X) Change ( ) Addition Name: EASTON, DONNA Address: PO BOX 7727 City-St-Zip: CLEARWATER, FL 33758

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

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SUSAN BROUGHTON DIR 05/02/2009

(X) Delete

BROUGHTON, SUSAN

CLEARWATER, FL 33758

PO BOX 7727

Title:

Name:

Address:

City-St-Zip:

() Change () Addition