

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2004 8:00 am**  
**Secretary of State**

04-15-2004 90003 034 \*\*\*\*61.25

**DOCUMENT # N97000005789**

1. Entity Name  
**CRITTENDEN, HOLT, TUCKER, INC.**



Principal Place of Business  
**13146 CANNA LILY DRIVE  
ORLANDO, FL 32824**

Mailing Address  
**13146 CANN LILY DRIVE  
ORLANDO, FL 32824**

**54033367**



2. Principal Place of Business

3. Mailing Address

*4420 Dunwoody Place*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02172004 Chg-NP CR2E037 (10/03)

City & State

City & State

*Orlando, FL*

4. FEI Number  
**65-0830005**

Applied For  
Not Applicable

Zip

Country

Zip

Country

*32808*

*U.S.*

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRITTENDEN, CELIA T  
13146 CANNA LILY DRIVE  
ORLANDO, FL 32824**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

*Celia T. Crittenden*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

*4-10-04*

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
CRITTENDEN, MELTON JR.  
112 TIMBER RUN WEST  
WEST PALM BEACH, FL 33407** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
WRIGHT, LUWANDO L  
3109 SW 19TH STREET  
FORT LAUDERDALE, FL 33068** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
CRITTENDEN, CELIA T  
13146 CANNA LILY DRIVE  
ORLANDO, FL 32824** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 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.

SIGNATURE:

*Celia T. Crittenden*

*4-10-04*

Date

Daytime Phone #