

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90016 043 ***158.75

DOCUMENT # P00000036419

1. Entity Name

COST RECOVERY GROUP, INC.



Principal Place of Business

3599 LAKE MARY BLVD, SUITE 2
LAKE MARY FL 32746

Mailing Address

3599 LAKE MARY BLVD, SUITE 2
LAKE MARY FL 32746

2. Principal Place of Business

1062 HENLEY DOWNS PLACE

3. Mailing Address

1062 HENLEY DOWNS PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HEATHROW, FL.

City & State

HEATHROW, FL.

Zip

32746

Country

U.S.

Zip

32746

Country

U.S.



MOORE

CR2E034 (11/03)

4. FEI Number

59-3682750

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KELCHNER, TERRY
3599 LAKE MARY BLVD, SUITE 2
LAKE MARY FL 32746

7. Name and Address of New Registered Agent

Name TERRY KELCHNER

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

1062 HENLEY DOWNS PLACE

City

HEATHROW,

FL

Zip Code

32746

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

Terry Kelchner

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-26-04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE C ☐ Delete
NAME MAZO, MARC
STREET ADDRESS 14252 PUFFIN CT
CITY-ST-ZIP CLEARWATER FL 33762

TITLE C ☐ Delete
NAME KELCHNER, TERRY
STREET ADDRESS 3599 LAKE MARY BLVD, SUITE 2
CITY-ST-ZIP LAKE MARY FL 32746

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1062 HENLEY DOWNS PL
CITY-ST-ZIP LAKE MARY, FL 32746-1972

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

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

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

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

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Terry Kelchner

Date

2-26-04. (407-804-1515)

Daytime Phone #