

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 A
Secretary of State

DOCUMENT # P00000091183

1. Entity Name
CRYSTALL ENTERPRISES OF LEE COUNTY, INC.



Principal Place of Business
2421 CRYSTALL DRIVE
FORT MYERS, FL 33907

Mailing Address
2421 CRYSTALL DRIVE
FORT MYERS, FL 33907



03292006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0541495

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GRAHAM, LYNNWOOD
2421 CRYSTALL DRIVE
FORT MYERS, FL 33907

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IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when re-instating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GRAHAM, LYNNWOOD
2115 SE 4TH STREET
CAPE CORAL, FL 33990

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
COLLINS, LINDA
2421 CRYSTAL DRIVE
FORT MYERS, FL 33907

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U00000553300
05/15/06-80044-021 158.75

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IN THIS SPACE**

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 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

Date

Daytime Phone #

4/26/06 (239) 277-7726