

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105582

FILED  
Apr 10, 2007  
Secretary of State

Entity Name: CRESCENT INSURANCE GROUP, INC.

## Current Principal Place of Business:

13400 PINE ST SW  
LARGO, FL 34774

## New Principal Place of Business:

855 28TH ST. S.  
ST. PETERSBURG, FL 33712

## Current Mailing Address:

13400 PINE ST SW  
LARGO, FL 34774

## New Mailing Address:

855 28TH ST. S.  
ST PETERSBURG, FL 33712

FEI Number: 69-3681901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAHMAN, MOHAMMAD D ADNAN  
8840 9TH STREET NORTH  
ST. PETERSBURG, FL 33702 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete  
Name: RAHMAN, MOHAMMAD D.A.  
Address: 8840 9TH ST NO  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: EVT ( ) Delete  
Name: RAHMAN, MOHAMMED A  
Address: 3137 CARLOS DR  
City-St-Zip: DUNEDIN, FL 33693

Title: VPS ( ) Delete  
Name: KOTCICHE, NICK S  
Address: 1115 - 37 AVE NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAMMAD D.A. RAHMAN

PCEO

04/10/2007

Electronic Signature of Signing Officer or Director

Date