FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90049 001 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000039464

1. Entity Name

CRG HANGERS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1210 Oceanfront
Suite, Apt. #, etc.
City & State
Neptune Beach, FL
Zip 32266 Country USA

3. Mailing Address
1210 Oceanfront
Suite, Apt. #, etc.
City & State
Neptune Beach, FL
Zip 32266 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3709921
☐ Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
Patrick W. Clyne
Street Address (P.O. Box Number is Not Acceptable)
1210 Oceanfront
City
Neptune Beach FL Zip Code 32266

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.

SIGNATURE Patrick W. Clyne Patrick W. Clyne Apr 29 2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P
NAME	Patrick W. Clyne
STREET ADDRESS	1210 Oceanfront
CITY-ST-ZIP	Neptune Beach, FL 32266
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Patrick W Clyne (President) Patrick W. Clyne Apr 29 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #