P03000157858

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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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TO: Amendment Section Division of Corporations CRES OF TAMPA BAY, INC. SUBJECT: P03000157858 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LISA BURFORD (Name of Contact Person) CRES OF TAMPA BAY, INC. (Firm/Company) 7916 EVOLUTIONS WAY, SUITE 210 (Address) TRINITY, FL 34655 (City/State and Zip Code) For further information concerning this matter, please call: LISA BURFORD (Area Code) (Davtime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION $\mathcal{U}_{ij} = \mathbb{C}_{ij}$

Pursuant to section 607.1403. Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: CRES OF TAMPA BAY, INC. The document number of the corporation (if known): P03000157858		
SECOND:			
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution <u>if applicable</u> : 12/31/2020 (no more than 90 days after dissolution file date)		
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
	11/8		
9	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	ALEX CRAMER		
	(Typed or printed name of person signing)		
	CFO		
	(Title of person signing)		

Filing Fee: \$35

MITCHELL, D DEWEY 7916 EVOLUTIONS WAY SUITE 210 TRINITY, FL 34655

Title P

CRUMBLEY, ALLEN S 7916 EVOLUTIONS WAY SUITE 210 TRINITY, FL 34655

Title V

SERCU, ROBB J 7916 EVOLUTIONS WAY SUITE 210 TRINITY, FL 34655

Title CFO

CRAMER, ALEX E 7916 EVOLUTIONS WAY SUITE 210 TRINITY, FL 34655

Title Asst. Secretary

Burford, Lisa 7916 EVOLUTIONS WAY SUITE 210 TRINITY, FL 34655

Annual Reports

Report Year	Filed Date
2018	04/17/2018
2019	04/29/2019
2020	03/30/2020

Document Images

03/30/2020 ANNUAL REPORT	View image in PDF format
05:09/2019 Amendment	View image in PDF format
<u>04/29/2019 ANNUAL REPORT</u>	View image in PDF format
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64-12-2013 ANNUAL REPORT	View image in PDF format
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