


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-21-2006 90029 040 ***150.00

DOCUMENT # P04000043310					
1. Entity Name CARROLLWOOD CROSSINGS ASSET MANAGEMENT SERVICES, INC.					
Principal Place of Business 4308 W. ROBIN LANE TAMPA, FL 33609			Mailing Address C/O TEMPLE H. DRUMMOND, ESQ. 6325 JACQUELINE ARBOR DRIVE TEMPLE TERRACE, FL 33617		
2. Principal Place of Business		3. Mailing Address 4308 W. ROBIN LN.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State TAMPA, FL		4. FEI Number 36-3190871	
Zip		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DRUMMOND, TEMPLE H 6325 JACQUELINE ARBOR DRIVE TEMPLE TERRACE, FL 33617			7. Name and Address of New Registered Agent Name: <u>BRAD LUGER</u> Street Address (P.O. Box Number is Not Acceptable): 4308 W. ROBIN LANE City: <u>TAMPA</u> <u>FL</u> Zip Code: <u>33609</u>		
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: <u>[Signature]</u> DATE: <u>7/17/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUGER, BRAD C 4308 W. ROBIN LANE TAMPA, FL 33609	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRENNER, HENRY 3622 JETTON AVENUE TAMPA, FL 33629	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>[Signature]</u>		Date: <u>7/17/06</u> Daytime Phone #: <u>813-342-4707</u>			

40100461



07172006 Chg-P CR2E034 (11/05)

ATTACHMENT

40100461
#P04000043310

July 17, 2006

Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314-6198

Certified Mail – Return Receipt Requested

**RE: 2006 For Profit Corporation Annual Report
Carrollwood Crossings Asset Management Services, Inc.**

To Whom It May Concern:

Our former Registered Agent recently forward to me the attached Notice of Intent to Dissolve concerning the corporation noted above.

Upon receipt of this notice, I checked with our bank and learned that check #1007 payable to the Florida Department of State had never cleared.

As you will see from the enclosed copies, the necessary form and check were mailed to the Florida Department of State on April 12, 2006.

Accordingly, I have enclosed another check in the amount of \$150.00 payable to the Florida Department of State. Also note on the form that I am serving as the new Registered Agent along with a new mailing address.

I am hopeful this unfortunate series of events will not result in the dissolution of the corporation and the payment of \$150.00 will be satisfactory to the State.

Please contact me at any of the numbers noted below or by mail should you have any questions.

Sincerely,



Brad Luger

Carrollwood Crossings Asset Management Services, Inc.

4308 W. Robin Lane
Tampa, Florida 33609
(P) 813.230.2449 (F) 813.342.4015

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000043310

1. Entity Name
CARROLLWOOD CROSSINGS ASSET MANAGEMENT
SERVICES, INC.



Principal Place of Business

4308 W. ROBIN LANE
TAMPA, FL 33609

Mailing Address

C/O TEMPLE H. DRUMMOND, ESQ.
6325 JACQUELINE ARBOR DRIVE
TEMPLE TERRACE, FL 33617

ATTACHMENT

40100461

2. Principal Place of Business

3. Mailing Address

4308 W. ROBIN LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04112006

Chg-P

CR2E034 (11/05)

City & State

City & State
TAMPA, FLORIDA

4. FEI Number

36-3190871

Applied For

Not Applicable

Zip

Country

Zip
33609

Country
U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DRUMMOND, TEMPLE H
6325 JACQUELINE ARBOR DRIVE
TEMPLE TERRACE, FL 33617

Name
BRAD LUGER

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

4308 W. ROBIN LANE

City
TAMPA

FL

Zip Code
33609

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

Brad Luger

4/12/06

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

(NOTE: Registered Agent signature required when retreating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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LUGER, BRAD C
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TAMPA, FL 33609 ☐ Delete

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TAMPA, FL 33629 ☐ Delete

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SIGNATURE:

Brad Luger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06 813-342-4707

Date

Daytime Phone #

ATTACHMENT

40100461

#PS400043318

CARROLLWOOD CROSSINGS ASSET MGT SERVICES
4308 W. ROBIN LN.
TAMPA, FL 33609

63-110575
831
1710204155

1007

PAY TO THE
ORDER OF

DATE 4/12/06

FLORIDA DEPT. OF STATE

\$150.00

ONE HUNDRED FIFTY

NORTHERN TRUST BANK OF FLORIDA N.A.

DOLLARS



Northern Trust

MEMO

Paul C. [Signature]