2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085823

FILED Jan 15, 2009 Secretary of State

Entity Name: CRIDLAND ENTERPRISES, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
957 S. LOIS STE 101	S TERRACE				
INVERNES	S, FL 34452	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	ICE BOX 1267 O, FL 34442	US	957 S. LOIS TERRACE STE 101 INVERNESS, FL 34452	US	
FEI Number:	33-1094124	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
CRIDLAND, LINDA J 4244 NORTH LINCOLN AVENUE BEVERLY HILLS, FL 34465 US			CRIDLAND, LINDA J 3640 N. INDIANHEAD RO HERNANDO, FL 34442	3640 N. INDIANHEAD ROAD	
The above in the State		ubmits this statement for the pu	urpose of changing its registered o	office or registered agent, or both,	
SIGNATURE: LINDA J. CRIDLAND				01/15/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Carr	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () CRIDLAND, LIND 3640 N INDIANHI HERNANDO, FL	EAD RD	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () E BONNELL, DENN 826 SETON AVEI LECANTO, FL 3-	NUE	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	. ,		Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	D ()[Delete D. F.	Title: ()) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: LINDA J. CRIDLAND D 01/15/2009

957 S. LOIS TERRACE, STE 101

INVERNESS, FL 34452 US

Address:

City-St-Zip: