2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04083

FILED Apr 03, 2009 Secretary of State

Entity Name: STYLE CREST ENTERPRISES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2450 ENTERPRISE STREET DRAWER A FREMONT, OH 43420					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2450 ENTERPRISE STREET DRAWER A FREMONT, OH 43420					
FEI Number:	34-1839276	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
BURTON, PHILLIP 5001 GATEWAY BLVD UNIT 10 LAKELAND, FL 33811 US					
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			t	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DCEO () I KERN, THOMAS 1520 FINEFROC FREMONT, OH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TS () I BURTON, PHILL 25986 W. RIVER PERRYSBURG,	RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) GRAY, GEORGE 401 E. NORTH S FOSTORIA, OH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/VP () Delete KERN, BRYAN T VP/DIR 2450 ENTERPRISE STREET FREMONT, OH 43420		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFOD () Delete FRANTZ, TYRONE G CFO/DIR 2450 ENTERPRISE STREET FREMONT, OH 43420		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VALLE, HENRY	SE STREET, DRAWER A	Title: Name: Address: City-St-Zip:	() 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					

SIGNATURE: PHILLIP BURTON T/S 04/03/2009

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