

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108930

FILED
Apr 25, 2006
Secretary of State

Entity Name: CROWNED ENTERPRISES OF FLORIDA INC

Current Principal Place of Business:

6867 SYLVAN WOODS DRIVE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

6867 SYLVAN WOODS DRIVE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 20-3263076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIRST LIGHT SERVICES OF FLORIDA INC
1025 SOUTH SEMORAN BOULEVARD
1093
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

FIRST LIGHT SERVICES OF FLORIDA INC
2139 KEWANNEE TRAIL
CASSELBERRY, FL 32707 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: COLIN KEOGH

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAUER, SHIRLEY A
Address: 6867 SYLVAN WOODS DRIVE
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: BAUER, STEPHEN
Address: 6867 SYLVAN WOODS DRIVE
City-St-Zip: SANFORD, FL 32771

Title: T () Delete
Name: BAUER, STEPHEN
Address: 6867 SYLVAN WOODS DRIVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: STEPHEN BAUER

S

04/25/2006

Electronic Signature of Signing Officer or Director

Date