

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120408

FILED  
Mar 27, 2009  
Secretary of State

Entity Name: CROWN FOAM DESIGNS INC

## Current Principal Place of Business:

4405 US HWY 92 EAST  
A&B  
LAKELAND, FL 33801

## New Principal Place of Business:

2508 PETERSON ROAD  
APOPKA, FL 32703

## Current Mailing Address:

4405 US HWY 92 EAST  
A&B  
LAKELAND, FL 33801

## New Mailing Address:

2508 PETERSON ROAD  
APOPKA, FL 32703

FEI Number: 20-5575111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA, LUPE  
4405 US HWY 92 EAST  
A&B  
LAKELAND, FL 33801 US

## Name and Address of New Registered Agent:

ELIZONDO, JUAN L  
2508 PETERSON ROAD  
APOPKA, FL 32703 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: JUAN ELIZONDO

03/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ELIZONDO, JUAN  
Address: 4405 US HWY 92 EAST STE A& B  
City-St-Zip: LAKELAND, FL 33801

Title: S/T (X) Delete  
Name: GARCIA, LUPE  
Address: 4405 US HWY 92 EAST, STE A&B  
City-St-Zip: LAKELAND, FL 33801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ELIZONDO, JUAN L  
Address: 2508 PETERSON ROAD  
City-St-Zip: APOPKA, FL 32703

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

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.

SIGNATURE: JUAN L ELIZONDO

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date