

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000099621

Entity Name: CRICKETS & CO., INC.

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4570 FOREST DR.  
MULBERRY, FL 33860

**New Principal Place of Business:**

**Current Mailing Address:**

4570 FOREST DR.  
MULBERRY, FL 33860

**New Mailing Address:**

FEI Number: 26-3676258

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARNETT, DARRYL  
4570 FOREST DR.  
MULBERRY, FL 33860 US

**Name and Address of New Registered Agent:**

BARNETT, LACRESHA L  
4570 FOREST DR.  
MULBERRY, FL 33860 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: LACRESHA BARNETT

04/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: BARNETT, LACRESHA L  
Address: 4570 FOREST DR.  
City-St-Zip: MULBERRY, FL 33860

Title: S  
Name: BARNETT, DARRYL R  
Address: 4570 FOREST DRIVE  
City-St-Zip: MULBERRY, FL 33860

Title: VP  
Name: COMBASS, JAMES L  
Address: 4195 FOREST DRIVE  
City-St-Zip: MULBERRY, FL 33860

I hereby 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 all other like empowered.

SIGNATURE: LACRESHA L BARNETT

DPT

04/15/2011

Electronic Signature of Signing Officer or Director

Date