

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000076703

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Entity Name:** CRYSTAL RIVER CONCEPTS, INC.

**Current Principal Place of Business:**

1801 NORTHWEST HIGHWAY 19  
CRYSTAL RIVER, FL 34428 US

**New Principal Place of Business:**

**Current Mailing Address:**

2745 N PENNSYLVANIA AVE  
CRYSTAL RIVER, FL 34428 US

**New Mailing Address:**

6383 N JADE TERRACE  
CRYSTAL RIVER, FL 34428 US

**FEI Number:** 27-0943370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABANA, ARLENE  
2541 N RESTON TERRACE  
HERNANDO, FL 34442 US

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

CABANA, ARLENE  
4589 W OAKLAWN ST  
LECANTO, FL 34461 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: ARLENE M CABANA

04/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RASH, PATRICK J  
Address: 6383 N JADE TERRACE  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

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: PATRICK RASH

P

04/11/2011

Electronic Signature of Signing Officer or Director

Date