

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 24 PM 1:13

DOCUMENT # **P18384 (8)**

1. Corporation Name
CRSS OF FLORIDA, INC.

Principal Place of Business Mailing Address
**1177 W. LOOP S.
STE - 900
HOUSTON TX 77027
US** **1177 W. LOOP S., SUITE 900
STE - 900
HOUSTON TX 77027
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
03/10/1988 **05/01/1994**

4. FEI Number Applied For / Not Applicable
76-0244717

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing / Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City 85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	MARTIN, CRAIG
STREET ADDRESS	1177 W. LOOP SO.
CITY-ST-ZIP	HOUSTON TX
TITLE	VD
NAME	GARDINER, WILLIAM J.
STREET ADDRESS	1177 W. LOOP SO.
CITY-ST-ZIP	HOUSTON TX
TITLE	T
NAME	ST. WRBA, JOHN
STREET ADDRESS	1177 W. LOOP SO.
CITY-ST-ZIP	HOUSTON TX
TITLE	S
NAME	PERRONE, FRANK A
STREET ADDRESS	1177 W. LOOPS
CITY-ST-ZIP	HOUSTON TX
TITLE	AT
NAME	PASHER, BRIAN P
STREET ADDRESS	1177 W LOOP S
CITY-ST-ZIP	HOUSTON TX
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	V/S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Timothy R. Dunne
1.3 STREET ADDRESS	1177 W. LOOP S
1.4 CITY-ST-ZIP	Hou, TX
2.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	V/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Mary V. Gilbert
3.3 STREET ADDRESS	1177 W. Loop S
3.4 CITY-ST-ZIP	Hou, TX
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Delete
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Delete
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William J. Gardiner 3-2095 713-552-2020
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Date Telephone #
WILLIAM J. GARDINER