

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049212

FILED
Jan 13, 2011
Secretary of State

Entity Name: CRESCENT ARMS VACATION RENTALS, INC.

Current Principal Place of Business:

6308 MIDNIGHT PASS RD
SARASOTA, FL 34242 US

New Principal Place of Business:

Current Mailing Address:

6308 MIDNIGHT PASS RD
SARASOTA, FL 34242 US

New Mailing Address:

FEI Number: 65-0424499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT, INC.
2477 STICKNEY POINT RD.
118A
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T
Name: ZELSON, JOE
Address: 6312 MIDNIGHT PASS # 101S
City-St-Zip: SARASOTA, FL 34242

Title: D
Name: SCHALLER, PAUL
Address: 6312 MIDNIGHT PASS # 501N
City-St-Zip: SARASOTA, FL 34242

Title: V
Name: LAUCIELLO, FRANK
Address: 6310 MIDNIGHT PASS RD., #301 N
City-St-Zip: SARASOTA, FL 34242

Title: P
Name: RETTICH, KATHY
Address: 46 EAST MARKET STREET
City-St-Zip: GERMANTOWN, OH 45327

Title: S
Name: ULRICH, RUTH
Address: 6312 MIDNIGHT PASS # 4035
City-St-Zip: SARASOTA, FL 34242

Title: AS
Name: HAMMERLING, WALTER
Address: 2477 STICKNEY POINT RD
City-St-Zip: SARASOTA, F 34242

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: WALTER HAMMERLING

AS

01/13/2011

Electronic Signature of Signing Officer or Director

Date