## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000074467

**DAVIE, FL 33325** 

City-St-Zip:

Entity Name: CROWN EAGLE FINANCIAL CORP

FILED Apr 03, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
14151 SW 24 STREET C/O ALLISON CARGILL DAVIE, FL 33325			14151 SW 24 STREE DAVIE, FL 33325	Т	
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
	24 STREET SON CARGILL 33325		14151 SW 24 STREE DAVIE, FL 33325	Т	
FEI Number	: 65-0445604	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
CARGILL, ALLISON 14151 SW 24TH ST FORT LAUDERDALE, FL 33325 US			CARGILL, ALLISON 14151 SW 24TH ST DAVIE, FL 33325	US	
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				04/03/2009	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	SAENZ, RAUL N	TREET SUITE 100	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DP () CARGILL, ALLIS 14151 SW 24 S DAVIE, FL 333	TREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () CARGILL, WAL' 14151 SW 24TH DAVIE, FL 333	H ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	SD () CARGILL, ALLIS 14151 SW 24TH		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ALLISON CARGILL PRES 04/03/2009