

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

1995 MAY -1 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 93000084565

1. Corporation Name

CRESCENT COVE CREEK CORP.

Principal Place of Business

Mailing Address

**28 CREEK BLUFF RUN
FLAGLER BEACH, FL 32136**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

12/10/93

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

4. FEI Number

Applied For

65-0460050

Not Applicable

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81

Name

JOHN H. GREENE

82

Street Address (P.O. Box Number is Not Acceptable)

81 BREEZE HILL LANE

83

84

City

PALM COAST

FL

85

Zip Code

32137

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

JOHN H. GREENE

JOHN H. GREENE

April 19, 1995

(Signature, typed or printed name of registered agent and title if applicable)

(Typed or printed name of registered agent required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
P/D	GEORGE A. NESMITH	28 CREEK BLUFF RUN	FLAGLER BEACH FL 32136
VP/D	MALCOLM G. JONES	2332 BOURGOGNE DRIVE	TALLAHASSEE, FL 32308
VISIT/D	JOHN H. GREENE	81 BREEZE HILL LN	PALM COAST, FL 32137
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY ST ZIP
21. TITLE	22. NAME	23. STREET ADDRESS	24. CITY ST ZIP
31. TITLE	32. NAME	33. STREET ADDRESS	34. CITY ST ZIP
41. TITLE	42. NAME	43. STREET ADDRESS	44. CITY ST ZIP
51. TITLE	52. NAME	53. STREET ADDRESS	54. CITY ST ZIP
61. TITLE	62. NAME	63. STREET ADDRESS	64. CITY ST ZIP

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******200.00 ****200.00**

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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 110.07(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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 19, 1995 904-446-4845