

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90210 008 ***150.00

DOCUMENT # P93000088180

1. Entity Name

CR ASSOCIATES INC.



Principal Place of Business

513 2ND AVENUE SOUTH
LAKE WORTH FL 33460
US

Mailing Address

513 2ND AVENUE SOUTH
LAKE WORTH FL 33460
US

2. Principal Place of Business

4550 Bimini Lane

Suite, Apt. #, etc.

3. Mailing Address

4550 Bimini Lane

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
West Palm Beach, FL

Zip
33417

Country

USA

City & State
West Palm Beach, FL

Zip
33417

Country

USA

4. FEI Number

58-2084045

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RIENDEAU, CHARLES L JR.
513 2ND AVE SOUTH
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name

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

4550 Bimini Lane

City

West Palm Beach FL

Zip Code

33417

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

X

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00.

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing.
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME RIENDEAU, CHARLES L JR.
STREET ADDRESS 3038 FARGO AVENUE
CITY-ST-ZIP LAKE WORTH FL 33467

☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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CITY-ST-ZIP

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☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerers.

SIGNATURE:

Charles L. Riendeau, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles L. Riendeau, Jr. (561) 588-2222
1/13/03
Daytime Phone #

CR2E034 (10/02)