

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000023546

Entity Name: CRI OF ORMOND BEACH, INC.

FILED
Jan 23, 2008
Secretary of State

Current Principal Place of Business:

1024 S NOVA RD
STE B
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1024 S NOVA RD
STE B
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3233016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEESBRO, MARTI M
1024 S NOVA RD
STE B
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

THOMPSON, MARTI M
1024 S NOVA RD
STE B
ORMOND BEACH, FL 32174 US

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: MARTI M. THOMPSON

01/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMPSON, MARTI M
Address: 284 S. ORCHARD ST.
City-St-Zip: ORMOND BEACH, FL

Title: V () Delete
Name: MCGLURE, WILLIAM G
Address: 598 BROOKS CIRCLE
City-St-Zip: SOUTH DAYTONA, FL

Title: VP () Delete
Name: CHEERBRO, GORDON
Address: 1300 MIDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMPSON, MARTI M
Address: 645 WILLIAMS ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MARTI THOMPSON

PRES

01/23/2008

Electronic Signature of Signing Officer or Director

Date