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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000087978

1. Corporation Name
CRYSTAL WIND COMMUNICATIONS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
155 SE HWY 19
SUITE G
CRYSTAL RIVER FL 34429
US

Mailing Address
155 SE HWY 19
SUITE G
CRYSTAL RIVER FL 34429
US

3. Date Incorporated or Qualified
12/02/1994

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 SUITE A 27 SUITE A

23 City & State 28 City & State

24 Zip 25 Country 29 Zip 30 Country

4. FEI Number
59-3281185

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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUSS, STEPHANIE J
8938 W RIVER GLEN CT
CRYSTAL RIVER FL 34448

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 *James W. Brewer* DATE 1-21-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DV DELETE
NAME DAVIS, MARK
STREET ADDRESS 879 N APPALACHIAN TERR
CITY-ST-ZIP CRYSTAL RIVER FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DP DELETE
NAME GREEN, EARL J
STREET ADDRESS 8938 W RIVER GLEN CT
CITY-ST-ZIP CRYSTAL RIVER FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Treasurer Change Addition
3.2 NAME Brewer, James W.
3.3 STREET ADDRESS 9426 N. China Pink Way
3.4 CITY-ST-ZIP Crystal River, FL 34428-9500

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Secretary Change Addition
4.2 NAME ELIZABETH C. PANOS
4.3 STREET ADDRESS 1515 OLD FLORAL CITY RD.
4.4 CITY-ST-ZIP INVERNESS, FL. 34450

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *James W. Brewer* DATE 1-21-99 DAYTIME PHONE # 352-523-2701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/98)