

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2002 8:00 am
Secretary of State

04-15-2002 90051 029 ***150.00

DOCUMENT # P95000011185

1. Entity Name

CROWN ACCOUNTING, INC.

Principal Place of Business

Mailing Address

~~453 LAKEVIEW DRIVE~~
~~CORAL SPRINGS FL 33071~~
~~US~~

~~453 LAKEVIEW DRIVE~~
~~CORAL SPRINGS FL 33071~~
~~US~~

2. Principal Place of Business

3. Mailing Address

5031 WILES ROAD #

5031 WILES ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

101

101

City & State

City & State

COCONUT CREEK, FL

COCONUT CREEK, FL

Zip

Country

Zip

Country

33073

USA

33073

USA

DO NOT WRITE IN THIS SPACE



4. FEI Number

65-0561627

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOOD, LARRY J

~~453 LAKEVIEW DRIVE~~
~~CORAL SPRINGS FL 33071~~

5031 WILES ROAD #101
COCONUT CREEK, FL
33073

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PT LARRY J. HOOD**
STREET ADDRESS ~~453 LAKEVIEW DRIVE~~
CITY-ST-ZIP ~~CORAL SPRINGS FL 33071~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5031 WILES ROAD #101**
CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE ☐ Delete
NAME **VPS JUNE HOOD**
STREET ADDRESS ~~453 LAKEVIEW DRIVE~~
CITY-ST-ZIP ~~CORAL SPRINGS FL 33071~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5031 WILES ROAD #101**
CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE ☐ Delete
NAME **PT HOOD, LARRY J**
STREET ADDRESS ~~453 LAKEVIEW DRIVE~~
CITY-ST-ZIP ~~CORAL SPRINGS FL 33071~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5031 WILES ROAD #101**
CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE ☐ Delete
NAME **VS HOOD, JUNE**
STREET ADDRESS ~~453 LAKEVIEW DRIVE~~
CITY-ST-ZIP ~~CORAL SPRINGS FL 33071~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5031 WILES ROAD #101**
CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Larry J. Hood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/06/02 954-977-6923
Date Daytime Phone #

CR2E034 (9/01)