## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000077250 (5)

CRESTVIEW READY RENT. INC.

Principal Place of Business Mailing Address 586 FAIRWAY COURT, NORTHEAST 586 FAIRWAY COURT, NORTHEAST FORT WALTON BEACH FL 32547 FORT WALTON BEACH FL 32547

## **FILED** Feb 18 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3353915 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & Stale \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Zφ Country Zφ 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MCMORROW, WILMA J R1 Name **586 FAIRWAY COURT, NORTHEAST** Street Address (P.O. Box Number is Not Acceptable) FORT WALTON BEACH FL 32547 83 84 City 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** Stanature, typed or prioted name of registerest against and the if applicable when (einstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Addition TITLE MCMORROW, WILMA J 1.2 NAME NAME CR2E034 **586 FAIRWAY COURT, NORTHEAST** 1.3 STREET ADDRESS STREET ADDRESS FORT WALTON BEACH FL 32547 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition Change DELETE TITLE 21 TIFLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. City-St-ZiP DELETE Change \_\_\_ Addition 4.1 TITLE TITLE 4 2 NAME MALIF 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELFTE Change 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 suppliemental 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.

WILMA J. MCMORROW SIGNATURE: 41/ Lung Yel MARI

850-243-8141