

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000101387		
1. Entity Name CRS CORPORATION OF SARASOTA COUNTY		
Principal Place of Business 2156 10TH STREET SARASOTA, F; 34237		Mailing Address 2156 10TH STREET SARASOTA, F; 34237
DO NOT WRITE IN THIS SPACE		
		 01182006 No Chg-P CR2E034 (11/05)
		4. FEI Number 65-0712288 Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
KAUFFMAN, SCOTT 2156 10TH STREET SARASOTA, FL 34237		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	P	
NAME	SHUE, JANET F	
STREET ADDRESS	2570 RIVER RIDGE DRIVE	
CITY - ST - ZIP	SARASOTA, FL 34239	
TITLE	VP	
NAME	PENNER, SUE E	
STREET ADDRESS	7458 CABBAGE PALM COURT	
CITY - ST - ZIP	SARASOTA, FL 34241	
TITLE	ST	
NAME	KAUFFMAN, JEANIE	
STREET ADDRESS	1645 FOX CREEK DRIVE	
CITY - ST - ZIP	SARASOTA, FL 34240	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of this report.		
SIGNATURE: <u><i>Jeanie Kauffman</i></u> <u>Jeanie Kauffman</u> <u>3/6/06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		