2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000057783

1. Entity Name
CRYSTAL SQUARE, INC.

Principal Place of Business	Mailing Address
225 ORLANDO ROAD BELLEAIR, FL 33756	225 ORLANDO ROAD BELLEAIR, FL 33756

02272006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3454823
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ARSENAULT, KENNETH G JR.
10225 ULMERTON ROAD
SUITE 2
LARGO, FL 33771

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i n the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	OPITZ, REINHARD
STREET ADDRESS	225 ORLANDO ROAD
CITY-ST-ZIP	BELLEAIR, FL 33756
TITLE	STD
NAME	WHITE, ROBERT
STREET ADDRESS	225 ORLANDO ROAD
CITY-ST-ZIP	BELLEAIR, FL 33756
TITLE	V
NAME	WHITE, CHERYL
STREET ADDRESS	225 ORLANDO ROAD
CITY-ST-ZIP	BELLEAIR, FL 33756
TITLE	ST
NAME	OPITZ, CONSTANCE
STREET ADDRESS	225 ORLANDO ROAD
CITY-ST-ZIP	BELLEAIR, FL 33756
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/25/06-80009-001 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statut es. 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 if changed, or on an attachment with an address, with all other files empowered.

SIGNATURE: _____ 3/18/06 727-586-3669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #