## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 22, 2007 8:00 am DOCUMENT # P97000106022 **Secretary of State** 1. Entity Name 02-22-2007 90022 044 \*\*\*150.00 CREST TITLE COMPANY Principal Place of Business Mailing Address 10925 OVERSEAS HWY 10925 OVERSEAS HWY MARATHON FL 33050 MARATHON FL 33050 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 5800 OVERSEAS HWY 5800 Overseus Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Suite 34 suite City & State City & State 4. FEI Number Applied For 65-0800715 MACATHON Florida Florida MAIATHON Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 33050 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SAME > April Motley MOTLEY, APRIL Street Address (P.O. Box Number is Not Acceptable) 5800 OVE(Seas HWY Su 10925 OVERSEAS HIGHWAY ne w MARATHON FL 33050 City MACA thon Zip Codo 33050 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD Change Addition HILL Delete THE CAMPBELL, DANIEL E NAME 5800 overseas Huy Suite 34 NAME 10925 OVERSEAS HIGHWAY STREET ADDRESS STREET ADDRESS MARATHON FL 33050 CHY ST 765 CHY ST 7IP marathan VΡ шп ☐ Delete THE Addition NARDONE, PAULA R NAME 5800 overseas Hwy Suite 34 10925 OVERSEAS HIGHWAY STREET ADDRESS STREET LADDRESS MARATHON FL 33050 MACA from, FI 33050 CHY ST 7IP CHY SL 7IP Change Addition HHI Defete THE NAME NAMI STREET ADDRESS STREET ADDRESS CHY SI ZIE CITY ST 7IP [ ] Change Addition Delete NAM NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY ST ZIP Delete 11011 ☐ Change Addition Addition HIDE NAME NAME STRUCT ADDRESS STREET ADDRESS CHY SI-7/P CITY+ST-ZIE Change ☐ Addition DILL ☐ Delete HOE NAME NAMI STREET ADDRESS STREET ADORESS C11Y - ST - 71P CITY SI-74P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiptor 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 phen like empowered.

FILED