

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2005 8:00 am
Secretary of State

01-06-2005 90003 032 ***150.00

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1. Entity Name
CRYSTAL PROPERTIES, INC.



Principal Place of Business
706 W 11 STREET
PANAMA CITY, FL 32401

Mailing Address
706 W 11 STREET
PANAMA CITY, FL 32401

50000257



2. Principal Place of Business

1269 Airport Rd.
Suite, Apt. #, etc.

3. Mailing Address

1269 Airport Rd.
Suite, Apt. #, etc.

01032005

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3568876

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

Panama City, FL

Zip

32405

Country

USA

City & State

Panama City, FL

Zip

32405

Country

USA

6. Name and Address of Current Registered Agent

LEDMAN, THOMAS W
1007 JENKS AVE
PANAMA CITY, FL 32401

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete
NAME ROBINSON, JEFFREY L
STREET ADDRESS 706 W 11TH ST
CITY-ST-ZIP PANAMA CITY, FL 32401

TITLE VPT ☐ Delete
NAME FEENEY, TIMOTHY M
STREET ADDRESS 706 W 11TH ST
CITY-ST-ZIP PANAMA CITY, FL 32401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1269 Airport Rd.
CITY-ST-ZIP Panama City, FL 32405

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1269 Airport Rd.
CITY-ST-ZIP Panama City, FL 32405

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NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 company 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #