2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000078460

Entity Name: 18 P. CROOM INCORPORATED

FILED May 01, 2004 Secrefary of State

Current Principal Place of Business:	New Principal Place of Business:
•	
31095 CORTEZ BOULEVARD BROOKSVILLE, FL 34602	
Current Mailing Address	Now Moiling Address
Current Mailing Address:	New Mailing Address:
31095 CORTEZ BOULEVARD BROOKSVILLE, FL 34602	
FEI Number: 59-3599858 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
MCKNINNEY, PAMELA R CPA	
309 S MAIN ST BROOKSVILLE, FL 34601 US	
The above named entity submits this statement for the nu	rpose of changing its registered office or registered agent, or bo
in the State of Florida.	Those of changing its registered office of registered agent, of bo
SIGNATURE:	
EL	nt Date
Electronic Signature of Registered Agen	nt Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: (X) Change () Addition CROOM, ROWENA CROOM 111, JAMES G Name: Name: 31138 CORTEZ BLVD Address: 31095 CORTEZ BLVD Address: City-St-Zip: BROOKSVILLE, FL 34602 City-St-Zip: BROOKSVILLE, FL 34602 Title: VPD () Delete Title: (X) Change () Addition

CROOM III, JAMES G CROOM, ROWENA G Name: Name: Address: 31138 CORTEZ BLVD Address: 31095 CORTEZ BLVD BROOKSVILLE, FL 34602 BROOKSVILLE, FL 34602 City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete TSD

Name: Name: CROOM, ROWENA G Address: Address: 31095 CORTEZ BLVD. City-St-Zip: City-St-Zip: BROOKSVILLE, FL 34602

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: ROWENA G CROOM 05/01/2004