

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 348134

Entity Name: CRESCENT FINANCIAL INC**Current Principal Place of Business:**601 II RIVERSIDE AVENUE
SUITE 600
JACKSONVILLE, FL 32204**Current Mailing Address:**PO BOX 40965
JACKSONVILLE, FL 32203 US**FEI Number:** 59-0548215**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VARN, LESTER JR.
601 II RIVERSIDE AVE
SUITE 600
JACKSONVILLE, FL 32204 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	VARN, LESTER, JR.
Address	601 II RIVERSIDE AVENUE, #600
City-State-Zip:	JACKSONVILLE FL 32203

Title	VPD
Name	VARN,III, WILLIAM L
Address	601 II RIVERSIDE AVENUE, #600
City-State-Zip:	JACKSONVILLE FL 32204

Title	STD
Name	VARN, JR., GEORGE W
Address	601 II RIVERSIDE AVENUE, #600
City-State-Zip:	JACKSONVILLE FL 32204

Title	AS
Name	VARN, MERRILL
Address	601 II RIVERSIDE AVENUE, #600
City-State-Zip:	JACKSONVILLE FL 32204

Title	ASST. TREASURER
Name	MERRITT, KENYON
Address	PO BOX 40965
City-State-Zip:	JACKSONVILLE FL 32203

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM L VARN III

VICE PRESIDENT

02/07/2024

Electronic Signature of Signing Officer/Director Detail_____
Date