

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000021147

**FILED  
Feb 07, 2013  
Secretary of State  
CC3003135415**

**Entity Name:** CROWN HEAD CORPORATION

**Current Principal Place of Business:**

1900 S. HARBOR CITY BLVD  
328  
MELBOURNE, FL 32901

**Current Mailing Address:**

3300 N. PORT ROYALE DRIVE  
309  
FORT LAUDERDALE, FL 33308

**FEI Number:** 68-0542442

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NICHOL, DAVID MJR.  
3300 N. PORT ROYALE DRIVE  
309  
FORT LAUDERDALE, FL 33308 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 D  
Name DELAPLAINE, MICHELLE P  
Address 3300 N. PORT ROYALE DRIVE #309  
City-State-Zip: FORT LAUDERDALE FL 33308

Title P  
Name DELALPLAINE, MICHELLE P  
Address 3300 N. PORT ROYALE DRIVE #309  
City-State-Zip: FORT LAUDERDALE FL 33308

Title S  
Name DELAPLAINE, MICHELLE P  
Address 3300 N. PORT ROYALE DRIVE #309  
City-State-Zip: FORT LAUDERDALE FL 33308

Title VP  
Name NICHOL,, DAVID M JR.  
Address 3300 N. PORT ROYALE DRIVE  
309  
City-State-Zip: FORT LAUDERDALE FL 33308

*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:** DAVID M. NICHOL, JR.

**VICE PRESIDENT**

**02/07/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date