

2006 FOR PROFIT CORPORATION ANNUAL REPORT


7/13/06

FILED
Aug 14, 2006 8:00 am
Secretary of State

07-13-2006 90023 018 ***150.00
 08-14-2006 90037 029 ***400.00

DOCUMENT# P03000099260

1. Entity Name
MCCROANCO, INC.



Principal Place of Business Mailing Address

12097 PALMETTO WAY 12097 PALMETTO WAY
DUNNELLON, FL 34432 US DUNNELLON, FL 34432 US

DO NOT WRITE IN THIS SPACE



03272008 No Chg-P CR2E034 (11/05)

4. FEI Number
85-1204539 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MCCROAN, RICHARD A
12097 PALMETTO WAY
DUNNELLON, FL 34432

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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 _____ DATE _____
Signature, typed in printed name of registered agent and title if applicable. (NONE, Registered Agent Signature required when re-electing)

FILE NOW! FEE IS \$150.00
AFTER MAY 1, 2006 Fee will be \$500.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MCCROAN, RICHARD A
STREET ADDRESS	12097 PALMETTO WAY
CITY-STATE-ZIP	DUNNELLON, FL 34432
TITLE	VP
NAME	MCCROAN, PAMELA T
STREET ADDRESS	12097 PALMETTO WAY
CITY-STATE-ZIP	DUNNELLON, FL 34432
TITLE	S
NAME	MCCROAN, ERNEST JR.
STREET ADDRESS	12097 PALMETTO WAY
CITY-STATE-ZIP	DUNNELLON, FL 34432
TITLE	T
NAME	MCCROAN, ERNEST JR.
STREET ADDRESS	12097 PALMETTO WAY
CITY-STATE-ZIP	DUNNELLON, FL 34432
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver 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 empowerments.

SIGNATURE: Richard A. McCroan **Richard A. McCroan** **7/8/06** **352-465-2514**
SIGNATURE AND TITLE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Date Overseas Phone #