

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 491800

Entity Name: AM-CRAFT, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

207 S. SUNSET TERRACE
INVERNESS, FL 344501815 US

New Principal Place of Business:

Current Mailing Address:

207 S. SUNSET TERRACE
INVERNESS, FL 344501815 US

New Mailing Address:

FEI Number: 59-1635501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STORR, GAIL
207 S. SUNSET TERRACE
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STORR, HOWARD J. SR.
Address: 207 SOUTH SUNSET TERRACE
City-St-Zip: INVERNESS, FL

Title: STD () Delete
Name: STORR, GAIL
Address: 207 S. SUNSET TERRACE
City-St-Zip: INVERNESS, FL 34450

Title: D () Delete
Name: STORR, GLENN L.
Address: 10806 SW 90TH COURT
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: GAIL STORR

_____ Electronic Signature of Signing Officer or Director

SEC.

04/29/2009

_____ Date