

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000158216

**Entity Name:** C. & R. GENERAL CONTRACTORS, INC.**Current Principal Place of Business:**2201 EDISON AVENUE  
JACKSONVILLE, FL 32204**Current Mailing Address:**2201 EDISON AVENUE  
JACKSONVILLE, FL 32204**FEI Number:** 20-3918199**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILLER, DONNA A  
7014 A.C. SKINNER PARKWAY SUITE290  
JACKSONVILLE, FL 32256 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, VP
Name	EDGE, AUBREY L
Address	7014 A. C. SKINNER PARKWAY SUITE 290
City-State-Zip:	JACKSONVILLE FL 32256

Title	D, VP
Name	RAY, JR, J. G.
Address	7014 A. C. SKINNER PARKWAY SUITE 290
City-State-Zip:	JACKSONVILLE FL 32256

Title	S
Name	MILLER, DONNA A
Address	7014 A. C. SKINNER PARKWAY SUITE 290
City-State-Zip:	JACKSONVILLE FL 32256

Title	CFO
Name	ALLEN, KENNETH
Address	7014 A. C. SKINNER PARKWAY SUITE 290
City-State-Zip:	JACKSONVILLE FL 32256

Title	PRESIDENT
Name	NORRIS, WILLIAM
Address	2201 EDISON AVENUE
City-State-Zip:	JACKSONVILLE FL 32204

*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:** AUBREY L. EDGE

D, VP

03/26/2015

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