

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000005981

**Entity Name:** CRAVEN INTERNATIONAL, INC.

**Current Principal Place of Business:**

HAVERHILL POST OFFICE  
3900 HAVERHILL ROAD, NORTH, P.O.BOX221124  
WEST PALM BEACH, FL 33417-9998

**Current Mailing Address:**

HAVERHILL POST OFFICE  
3900 HAVERHILL ROAD, NORTH, P.O.BOX221124  
WEST PALM BEACH, FL 33417-9998 US

**FEI Number:** 57-0965347

**Certificate of Status Desired:** Yes

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

LOVELADY, PAUL V  
880 RYANWOOD DRIVE  
WEST PALM BEACH, FL 33413 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            PRESIDENT  
Name            LOVELADY, VICTOR T  
Address        HAVERHILL POST OFFICE  
                  3900 HAVERHILL ROAD, NORTH,  
                  P.O.BOX 221124  
City-State-Zip: WEST PALM BEACH FL 33417-9998

Title            VP  
Name            LOVELADY, PAUL V  
Address        880 RYANWOOD DR  
City-State-Zip: WEST PALM BEACH FL 33413

Title            SEC.  
Name            LOVELADY, BETTY  
Address        HAVERHILL POST OFFICE  
                  3900 HAVERHILL ROAD, NORTH,  
                  P.O.BOX 221124  
City-State-Zip: WEST PALM BEACH FL 33417-9998

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:** VICTOR LOVELADY

**PRESIDENT**

**01/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date