2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002288

Entity Name: CRAFCO, INC.

Current Principal Place of Business:

6165 W. DETROIT STREET CHANDLER, AZ 85226

Current Mailing Address:

6165 W. DETROIT STREET CHANDLER, AZ 85226 US

FEI Number: 86-0324978

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Direc			
Title	C/D	Title	VP
Name	LAMPTON, WILLIAM W.	Name	KELLY, N. THOMAS
Address	2829 LAKELAND DRIVE	Address	6165 W. DETROIT STREET
City-State-Zip:	JACKSON MS 39232	City-State-Zip:	CHANDLER AZ 85226
Title	SECRETARY	Title	AS/CONTROLLER
Name	STONE, KATHRYN W.	Name	GAUTIER, GAIL
Address	2829 LAKELAND DRIVE	Address	6165 W. DETROIT STREET
City-State-Zip:	JACKSON MS 39232	City-State-Zip:	CHANDLER AZ 85226
Title	D	Title	DIRECTOR
Title Name	D BURNS, J. BAXTER II	Title Name	DIRECTOR LAMPTON, ROBERT H
	-		
Name	BURNS, J. BAXTER II 2829 LAKELAND DRIVE	Name	LAMPTON, ROBERT H
Name Address	BURNS, J. BAXTER II 2829 LAKELAND DRIVE	Name Address	LAMPTON, ROBERT H 2829 LAKELAND DRIVE
Name Address City-State-Zip:	BURNS, J. BAXTER II 2829 LAKELAND DRIVE JACKSON MS 39232	Name Address City-State-Zip:	LAMPTON, ROBERT H 2829 LAKELAND DRIVE JACKSON MS 39232
Name Address City-State-Zip: Title	BURNS, J. BAXTER II 2829 LAKELAND DRIVE JACKSON MS 39232 VP, CFO	Name Address City-State-Zip: Title	LAMPTON, ROBERT H 2829 LAKELAND DRIVE JACKSON MS 39232 VP
Name Address City-State-Zip: Title Name	BURNS, J. BAXTER II 2829 LAKELAND DRIVE JACKSON MS 39232 VP, CFO WALL, ALAN 2829 LAKELAND DRIVE	Name Address City-State-Zip: Title Name	LAMPTON, ROBERT H 2829 LAKELAND DRIVE JACKSON MS 39232 VP STABLER, ROBERT 6165 W. DETROIT ST.

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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: ALAN WALL

EXEC VP & CFO

04/21/2022

Date

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 21, 2022 Secretary of State 0262867043CC

Officer/Director Detail Continued :

Title	VP	Title	VP, DIRECTOR
Name	PATRICK, KRIS	Name	JOHNSON, GARY
Address	2829 LAKELAND DRIVE	Address	6165 W. DETROIT STREET
City-State-Zip:	JACKSON MS 39232	City-State-Zip:	CHANDLER AZ 85226
Title	VP	Title	TREASURER
Title Name	VP MITCHELL, MATTHEW	Title Name	TREASURER HODGES, KENNETH E
Name	MITCHELL, MATTHEW	Name	HODGES, KENNETH E