

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Mar 05, 2007 8:00 am**  
**Secretary of State**

03-05-2007 90062 049 \*\*\*150.00

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02262007 Chg-P CR2E034 (12/06)

<b>DOCUMENT # 329995</b>					
1. Entity Name R & C HOLDING COMPANY INC					
Principal Place of Business P. O. BOX 56 EVERETT, PA 15537			Mailing Address P. O. BOX 56 EVERETT, PA 15537		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1236626	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  CRAWFORD, JANELE 3350 NORTH KEY DRIVE SUITE B-1011 N FT MYERS, FL 33903			7. Name and Address of New Registered Agent Name KREBS, JANELE Street Address (P.O. Box Number is Not Acceptable) 7574 TANIA LANE City N. FT. MYERS FL Zip Code 33917		
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 <i>Janele Krebs</i>			DATE 3/1/07		
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV CRAWFORD, JOHN 402 DETWILER ROAD EVERETT, PA 15537 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3350 N. KEY DRIVE, #B-1011 N. FT. MYERS, FL 33903		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRAWFORD, NANCY 402 DETWILER ROAD EVERETT, PA 15537 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3350 N. KEY DRIVE, #B-1011 N. FT. MYERS, FL 33903		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CRAWFORD JANELE 3350 NORTH KEY DRIVE SUITE B-1011 NORTH FORT MYERS, FL 33903 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition KREBS, JANELE 7574 TANIA LANE N. FT. MYERS, FL 33917		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CRAWFORD, JOHN F. IV 402 DETWILER ROAD EVERETT, PA 15537 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 729 BUNKER HILL ROAD		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 empowered.					
SIGNATURE: <i>John Crawford Pres.</i>			3/1/07 ✓		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
JOHN CRAWFORD			Daytime Phone # 239-851-6460		