

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 10, 2006 8:00 am**  
**Secretary of State**

03-10-2006 90014 014 \*\*\*150.00

**DOCUMENT # 535758**

1. Entity Name  
SPAULDING CRAFT INC.



Principal Place of Business  
1053 HARBOR LAKE DR.  
P.O. BOX 357  
SAFETY HARBOR, FL 34695

Mailing Address  
1053 HARBOR LAKE DR.  
P.O. BOX 357  
SAFETY HARBOR, FL 34695

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03072006

Chg-P

CR2E034 (11/05)

4. FEI Number

59-1725116

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPAULDING, GEORGE C  
7 BRAESIDE PLACE  
CLEARWATER, FL 34619

DECEASED

7. Name and Address of New Registered Agent

Name WAYNE R. SPAULDING

Street Address (P.O. Box Number is Not Acceptable)

1053 HARBOR LAKE DR.

City SAFETY HARBOR, FL

Zip Code 34695

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 WAYNE R. SPAULDING

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/7/06

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP  
NAME SPAULDING, GEORGE C  
STREET ADDRESS 7 BRAESIDE PLACE  
CITY-ST-ZIP CLEARWATER, FL ☒ Delete

deceased

TITLE D  
NAME SPAULDING, WAYNE R.  
STREET ADDRESS 655 RIVIERE ROAD  
CITY-ST-ZIP PALM HARBOR, FL 34683 ☒ Delete

TITLE ST  
NAME SPAULDING, JOAN  
STREET ADDRESS 1374 WICKFORD STREET  
CITY-ST-ZIP SAFETY HARBOR, FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRES  
NAME SPAULDING, WAYNE R.  
STREET ADDRESS 1053 HARBOR LAKE DR  
CITY-ST-ZIP SAFETY HARBOR, FL 34695 ☐ Change ☒ Addition

TITLE D.  
NAME SPAULDING WAYNE R.  
STREET ADDRESS 1053 HARBOR LAKE DR.  
CITY-ST-ZIP SAFETY HARBOR, FL 34695 ☒ Change ☐ Addition

TITLE ST  
NAME SPAULDING JOAN  
STREET ADDRESS 1053 HARBOR LAKE DR  
CITY-ST-ZIP SAFETY HARBOR, FL 34695 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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: Joan Spaulding JOAN SPAULDING

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/7/06 727-726-2314