

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 545922

1. Entity Name
THREE CRAFTY LADIES, INC.



Principal Place of Business
1620 PERIWINKLE WAY
SANIBEL, FL 33957 US

Mailing Address
1620 PERIWINKLE WAY
SANIBEL, FL 33957 US

DO NOT WRITE IN THIS SPACE

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03172006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1771024

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PREVATT, GERTRUDE
1017 EL RIO AVENUE
FT MYERS, FL 33919

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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

Signature, typed or printed name of registered agent and fee (if applicable).

(NOTE: Registered Agents signature required when re-instating)

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

000000465732
03/22/06 80047-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	PDS
NAME	PREVATT, GERTRUDE
STREET ADDRESS	1017 EL RIO AVENUE
CITY - ST - ZIP	FT MYERS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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IN THIS SPACE

22. 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: *Gertrude Prevatt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/06 239-472-2893
Date Daytime Phone #