

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 644341

Entity Name: BOB CRAWFORD, INC.

FILED
Apr 08, 2004
Secretary of State

Current Principal Place of Business:

116 RIVER DRIVE
PANACEA, FL 32346 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10868
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 59-1954167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, BOB
1819 W PENSACOLA ST C9
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

CRAWFORD, BOB
3144 LEGENDS CIRCLE
LAKELAND, FL 33803 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: BOB CRAWFORD

04/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CRAWFORD, NANCY C
Address: 1819 W PENSACOLA ST C9
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CRAWFORD, NANCY C
Address: 3144 LEGENDS CIRCLE
City-St-Zip: LAKELAND, FL 33803

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY C. CRAWFORD

VP

04/08/2004

Electronic Signature of Signing Officer or Director

Date