## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 666034** 

Entity Name: CREWS BANKING CORPORATION

FILED Apr 18, 2006 Secretary of State

106 EAST MAIN ST PO BOX 248 106 EAST MAIN ST WAUCHULA, FL 33873

WAUCHULA, FL 33873

Current Mailing Address: New Mailing Address:

106 EAST MAIN ST P O BOX 248

PO BOX 248 WAUCHULA, FL 33873 WAUCHULA, FL 33873

FEI Number: 59-2068084 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CREWS, JR, J W CREWS, J W JR 129 GRIFFIN RD 129 GRIFFIN RD

WAUCHULA, FL 33873 US WAUCHULA, FL 33873 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: J W CREWS, JR 04/18/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 CREWS, JR, J W
 Name:
 CREWS, J W JR

 Address:
 129 GRIFFIN RD
 129 GRIFFIN RD

 City-St-Zip:
 WAUCHULA, FL 33873
 City-St-Zip:
 WAUCHULA, FL 33873

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CREWS, H D
 Name:

 Address:
 404 VANDERBILT RD
 Address:

 City-St-Zip:
 ASHEVILLE, NC 28803
 City-St-Zip:

Title: DST ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CREWS, WALTER M
 Name:

 Address:
 106 E MAIN STREET
 Address:

 City-St-Zip:
 WAUCHULA, FL 33873
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ALOIAN, DEÑA C
 Name:

 Address:
 808 S POINSETTIA DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JOHNSON, HJÁLMA E
 Name:

 Address:
 14435 HALE ROAD
 Address:

 City-St-Zip:
 DADE CITY, FL 33523
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: J W CREWS, JR DP 04/18/2006