2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005966

Entity Name: HALCROW, INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4010 BOY S SUITE 580 TAMPA, FL	SCOUT BOULE 33607	VARD,			
Current Mailing Address:			New Mailing Address:		
31ST FLOC	ANDT STREET DR K, NY 10007	US			
FEI Number:	20-1900891	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
STOCKBERGER, MICHAEL T 4010 BOY SCOUT BOULEVARD, SUITE 580 TAMPA, FL 33607 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:					
	Electronic	Signature of Registered Agent		Date	
Election Cam	paign Financing 1	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D DELLA ROCCA, M 22 CORTLANDT S NEW YORK, NY	MICHAEL MR STREET, 31ST FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TR () D BRENNAN, COLL 22 CORTLANDT S NEW YORK, NY	EEN MS STREET, 31ST FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () D JUNOLD, HELGA 22 CORTLANDT S NEW YORK, NY	E MS STREET, 31ST FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D JAMES, JAMES T 22 CORTLANDT S NEW YORK, NY	MR STREETM 31ST FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: YOLANDE MAGLOIRE MS 01/05/2009