

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002043

FILED
Apr 03, 2008
Secretary of State

Entity Name: CRAWFORD & COMPANY OF FLORIDA

Current Principal Place of Business:

2301 LUCIEN WAY
SUITE 360
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 5047
ATLANTA, GA 30342

New Mailing Address:

FEI Number: 65-0739513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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 Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CRAWFORD, THOMAS W
Address: 5620 GLENRIDGE DR
City-St-Zip: ATLANTA, GA 30342

Title: PD () Delete
Name: TAYLOR, HENRY
Address: 2301 LUCIEN WAY, STE 360
City-St-Zip: MAITLAND, FL 32751

Title: DS () Delete
Name: CARR, KONDA
Address: 901 NORTHPOINT PARKWAY, SUITE 308
City-St-Zip: W PALM BCH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CRAWFORD, THOMAS W
Address: 1001 SUMMIT BLVD.
City-St-Zip: ATLANTA, GA 30319

Title: PD (X) Change () Addition
Name: SMITH, RONALD E
Address: 4919 MEMORIAL HWY, STE 250
City-St-Zip: TAMPA, FL 33634

Title: SD (X) Change () Addition
Name: CORRIS, JENNIFER L
Address: 4919 MEMORIAL HWY, STE 250
City-St-Zip: TAMPA, FL 33634

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: RONALD E. SMITH

P

04/03/2008

Electronic Signature of Signing Officer or Director

Date