2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000252

Entity Name: F. L. CRANE AND SONS, INC.

FILED Jul 06, 2006 Secretary of State

Current Pri	incipal Place	of Business:	New Princ	New Principal Place of Business:		
P.O. BOX 428 508 SOUTH SPRING ST. FULTON, MS 38843						
Current Mailing Address:			New Mailir	New Mailing Address:		
P.O. BOX 428 508 SOUTH SPRING ST. FULTON, MS 38843						
FEI Number: 64-0409707 FEI Number Applied For () FEI Number			FEI Number Not Appli	nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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			t		Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () CRANE, JOHNN' 116 FRANCIS DI FULTON, MS 38	RIVE	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	CFO () CRANE, JIMMIE 610 LINWOOD E FULTON, MS 38	DR.	Title: Name: Address: City-St-Zip:	CHRM (X) Change CRANE, JIMMIE U 610 LINWOOD DR. FULTON, MS 38843	e () Addition	
Title: Name: Address: City-St-Zip:	PRES () I CRANE, JOHNN' 1930 BENSON-J FULTON, MS 38	ONES RD.	Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Title: Name: Address: City-St-Zip:	S () I CRANE, BESSIE 116 FRANCIS DI FULTON, MS 38	RIVE	Title: Name: Address: City-St-Zip:	() Change	e()Addition	
Title: Name: Address: City-St-Zip:	T () CRANE, HILDA L 610 LINWOOD E FULTON, MS 38	DR.	Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Title: Name: Address: City-St-Zip:	CFO () CRANE, JIMMIE 610 LINWOOD E FULTON, MS 38	DR.	Title: Name: Address: City-St-Zip:	CHRM (X) Change CRANE, JIMMIE U 610 LINWOOD DR. FULTON, MS 38843	e () Addition	
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						

SIGNATURE: JOHNNY L CRANE CEO 07/06/2006

above, or on an attachment with an address, with all other like empowered.