2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G76785

FILED May 01, 2007 Secretary of State

Entity Name: STANLEY CRAWFORD CONSTRUCTION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
	SISTERS WEI Y, FL 32025	LCOME RD. US			
Current N	/lailing Addres	ss:	New Mailing Addres	s:	
	SISTERS WEL Y, FL 32025	COME RD. US			
FEI Numbe	r: 59-2364997	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	SISTERS WEL				
LAKE CIT	Y, FL 32025 e named entity se of Florida.	US	purpose of changing its registere	d office or registered agent, or both,	
LAKE CIT The above in the Stat	Y, FL 32025 e named entity se of Florida. RE:	US		d office or registered agent, or both, Date	
LAKE CIT The above in the Stat SIGNATU	Y, FL 32025 e named entity se of Florida. RE: Electror	US submits this statement for the	gent		
LAKE CIT The above in the Stat SIGNATU In accordar Election Ca	Y, FL 32025 e named entity se of Florida. RE: Electror	US submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ent oot receive the prior notice.		
LAKE CIT The above in the Stat SIGNATU In accordar Election Ca	Y, FL 32025 e named entity se of Florida. RE: Electror nce with s. 607.19 impaign Financing S AND DIREC	Submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did ng Trust Fund Contribution (). TORS: Delete MARY ANN, NTY RD. 242	ent oot receive the prior notice.	Date	

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: MARY ANN CRAWFORD ST 05/01/2007