FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H25009

(2)

CRAWFORD COMPUTERS INTERNATIONAL, INC.

FILED Mar 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										
	SIA BLVD., #1A NE FL 32084-8424	ST. AUGU	403 ANASTASIA BLVD., #1A St. Augustine Fl 32084-8424 Us				DO NOT WRITE IN T	HIS SPAC	E	
00		•••	40				3. Date Incorporated or Qualified			····
						•	10/11/1984			
2. Principal Place of Business 2a, Mailing Address							4. FEI Number		IA.	oplied For
21	-	1 	26				59-2463239	•		ot Applicable
Suite, Apt.	#, atc.		Suite, Apt. #, etc.					\$8		Additionat
22		⊢ ¬	27				5. Certificate of Status Desired			equired
City & State	9		City & State				6. Election Campaign Financing			May Be
23		28	28				Trust Fund Contribution			to Fees
Zip	Country	Zip		Countr	y		8. This corporation owes or has paid the			
24	25	29		30	-		Personal Property Tax due June 30.	Yes		J No
	g. Name and Address of Curre						10. Name and Address of New Registe	red Agent		
BE	RINHARD, GLENN			81	ĪΝ	lame				
COMPUTER COTTAGE					82 Str		20 0 5 H N - 1			
403 ANASTASIA BLVD., STE. 1-A					2 8	treet Address (P.O. Box Number is Not Acceptable)			i	
	AUGUSTINE FL 32084			83	3					
•,,	11000011112 1 2 02001									
				84	4 C	City	•	FL 85	Zip (Code
44 Purcuant I	to the provisions of Sections 607.05	502 and 607 1509	Florida Statute	e the abov	(Q.n)	amed corn		_	ging if	e registered
office or re	egistered agent, or both, in the Sta	ite of Florida. Such	, riolida statute i change was a	uthorized b	by the	e corporation	oration submits this statement for the purposion's board of directors. I hereby accept the	appointm	ent as	registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE				B			ed when reinstating) DA			
					egislered Agent signature requ		ADDITIONS/CHANGES TO OFFICERS		CTOE	- IAI 20
TITLE	P	IND DIFFECTORS	DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS		hange	Addition
NAME	CRAWFORD, JIWAN			1.2 NAME			0		re-rigio	CJ MOUNTAIN
	403 ANASTASIA BLVD #1A					neer				ì
STREET ADDRESS	ST AUGUSTINE FL	•		1.3 STREE			•			ì
CITY-ST-ZIP	V		DELETE	1,4 CITY -		IP		C		Addition
TITLE	BERNHARD, GLENN		L DECERE	2.1 TITLE				L_1 0	lange	LJ MOURIOR 1
NAME .	403 ANASTASIA BLVD #1A			22 NAME		- 1				}
STREET ADDRESS				2.3 STREE	T ADD	DRESS				ĺ
CITY-ST-ZIP	ST AUGUSTINE FL			2.4 CITY-	<u> 51 - Z</u>	IP 1				
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NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE	T ADD	ress				1
CITY-ST-ZIP				3.4. CITY-	ST-Z	IP .				
TITLE			DELETE	4.1 TITLE					nange	Addition
NAME				4. 2 NAME	Ē					
STREET ADDRESS				4.3 STREE	T ADD	DRESS				ļ
CITY - ST - ZIP				4.4 CITY-	ST-ZII	Р				
TITLE			DELETE	5.1 TITLE				C	nange	Addition
NAME				5.2 NAME		ĺ				ĺ
STREET ADDRESS				5.3 STREE		RESS				
CITY-ST-ZIP				5.4 CITY-5		}				1
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NAME				6.2 NAME		- 1				
						nece				
STREET ADDRESS				6.3 STREET]
CITY-ST-ZIP				6.4 CITY-	ST - ZII	Р				

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

ble & Borma I UPI CCI 3-11-98 904-624-9218