


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # H47695 1. Entity Name CRAIG'S RESTAURANT, INC.				
Principal Place of Business 90154 S OVERSEAS HWY TAVERNIER, FL 33070 US		Mailing Address % STEVEN BELCHER 5052 FAIRFIELD DR FT MYERS, FL 33919 US		
DO NOT WRITE IN THIS SPACE				
				01102006 No Chg-P CR2E034 (11/05)
		4. FEI Number 59-2523224		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BELCHER, D. CRAIG 90154 S. OVERSEAS HWY. TAVERNIER, FL 33070				
DO NOT WRITE IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____				
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BELCHER, D. CRAIG 9 MARTINY DR KEY LARGO, FL			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BELCHER, STEVEN G. 5052 FAIRFIELD DR FT MYERS, FL			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BELCHER, JEAN AREL 5052 FAIRFIELD DRIVE FORT MYERS, FL 33919			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: <u>Steven Belcher</u> STEVEN BELCHER		01/14/2006 239 418 0009		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>		

000000396174
01/27/06-80022-002 150.00

**DO NOT WRITE
IN THIS SPACE**