
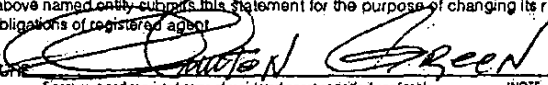


2006 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 29, 2006 8:00 am
Secretary of State

08-14-2006 90037 002 ***150.00

DOCUMENT # K92243					
1. Entity Name C & R GROUP, INC.					
Principal Place of Business 1315 SUMMERLIN AVE SUITE 800 SANFORD FL 32771			Mailing Address 1315 SUMMERLIN AVE SUITE 800 SANFORD FL 32771		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2952075	
				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GREEN, CLINTON 1315 SUMMERLIN AVE SANFORD FL 32771				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 				DATE	
Signature, typed or printed name of registered agent and title if applicable				(NOTE: Registered Agent signature required when reinstating)	



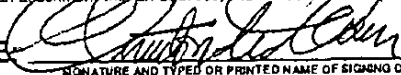
1st MOORE CR2E034 (10/04)

FILE NOW! FEES \$150.00
ANSWER BY 2:00 PM WILL BE \$50.00
MAKE CHECKS PAYABLE TO THE SECRETARY OF STATE

9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PD	NAME GREEN, RETHA	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1315 S. SUMMERLIN AVE.	CITY-ST-ZIP SANFORD FL	8/6/06	STREET ADDRESS	CITY-ST-ZIP	
TITLE VP	NAME GREEN, CLINTON	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1315 S. SUMMERLIN AVE.	CITY-ST-ZIP SANFORD FL	8/6/06	STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	

12. 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 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  DATE **8/6/06** DAYTIME PHONE # **407.333.0541**

ATTACHMENT

66023627
#K92243

C & R Group Inc.
1315 S. Summerlin Ave.
Sanford, FL. 32771


08/24/2006

Florida Dept. of State Div. of corp.

Dear Sir or Madam,

Please be advised that I did not receive the Renewal application prier to May 1, after waiting so long. I send my checks with my application for renewal. Therefore I am respectfully request that the late fee with drawn. One Hundred and Fifty Dollars already holding.

Thanking for your Kindness.


Clinton Green