2007 FOR PROFIT CORPORÁTION ANNUAL REPORT

FILED Jan 12, 2007 08:00 AM Secretary of State

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1. Entity Name

CRAMER PROPERTIES, INC.



Principal Place of Business

Mailing Address

2251 W. 23RD ST. P.O. BOX 490 2251 W. 23RD ST. P.O. BOX 490

PANAMA CITY, FL 32405

PANAMA CITY, FL 32405



DO NOT WRITE IN THIS SPACE

01062007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2973560

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRAMER, WILLIAM C. JR. 112 BUNKERS COVE ROAD PANAMA CITY, FL 32401

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	nurpose of changing its registered off	fice or re	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	of applicable. (NOTE: Registered Agen	nt sign#lure	required when rainstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY - ST-ZIP	PD CRAMER JR., WILLIAM C. 2251 W. 23RD ST. PANAMA CITY, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CRAMER, CAROLYN 2251 W. 23RD ST. PANAMA CITY, FL				000000584778 01/12/07-80051-006 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRAMER, CAROLYN 2251 W 23RD ST PANAMA CITY, FL 32405			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ODUM, GAYLE 2251 W 23RD ST PANAMA CITY, FL 32405		IN THIS SPACE			
TITLE NAME STREET ADDRESS City-St-Zip						
TITLE NAME					•	

12. Thereby 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 are execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY - ST - ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

. Cramer, Jr.

1/10/07

(850) 747-7621

Daytime Phone #