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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90037 010 \*\*\*150.00

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1. Corporation Name

CRAFTSYSTEMS, INC.

Principal Place of Business Mailing Address			1 19911911 991 19111 19911 1991 1991 1991				
1908 78TH ST NW	1908 78TH ST NW				*		
BRADENTON FL 34209	BRADENTON PL 34203	BRADENTON FL 34209		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 07/05/1990			
2. Principal Place of Business	2a. Mailing Address		- 1	4. FEI Number		Applied For	
21 3657 Co-tez Roll	) 26 3657 (or	ter.	RdW	65-0213311		Not Applicable	
Suite Apt. #, etc.	Suite Apt. #, etc.			5. Certifcate of Status Desired		5 Additional Required	
22 /00	27 /00					<del></del>	
23 Dodenton (L	28 Bradenton	1	2	6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees	
Zip Country		ountry		8. This corporation owes the current year Inf	angible	_	
24 342/0 25	29 342/0 30			Personal Property Tax.	Yes	□No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
		81	Name				
CRAFT, LARRY L.		82	Ctroot Addres	ss (P.O. Box Number is Not Acceptable)			
1908 78TH ST. NW		02	Street Addres	55 (F.O. Box Number is Not Acceptable)			
BRADENTON FL 34209		83					
•		84	City	FL	85	Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re-	gistered Agent signature require	od when reinstating) DATE	- (
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\Box$
TITLE	D DELETE	1.1 TITLE	☐ Change ☐ Addition	on
NAME	CRAFT, LARRY L.	1.2 NAME		ĺ
STREET ADDRESS	1908-78TH ST. NW.	1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34209	1.4 CITY-ST-ZIP		_
TITLE	DELETE	2.1 TITLE	☐ Change ☐ Addibi	on.
NAME	CRAFT, JANIE L	2.2 NAME		
STREET ADDRESS	1908 78TH ST. NW	2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34209	2.4 CITY-ST-ZIP		<u>-</u>
TITLE 🕳	DELETE DELETE	3.1 TITLE	Change Addition	on
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		ŀ
CITY-ST-ZIP		3.4. CITY-ST-ZIP		_
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition	on
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ OELETE	5.1 TITLE	☐ Change ☐ Addition	on
NAME		5.2 NAME		
STREET ADDRESS	•	5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		_
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition	on
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. 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 attacoment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPE OF PRINTED NAME OF SIGNING D

8/31/99 Tate

941-792-5212 Daytime Phone #