

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M68002

Entity Name: J.W. CREWS COMPANY, INC.

FILED
Apr 15, 2004
Secretary of State

Current Principal Place of Business:

223 U.S. HWY 17 SOUTH, UNIT #1
YULEE, FL 32097 US

New Principal Place of Business:

Current Mailing Address:

223 U.S. HWY 17 SOUTH, UNIT #1
YULEE, FL 32097 US

New Mailing Address:

8445 ARLINGTON EXPRESSWAY
JACKSONVILLE, FL 32211 US

FEI Number: 59-2874762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAVEN, JOHN W JR
3306 INDEPENDENT SQ
1 INDEPENDENT DR
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CREWS, JAMES W.,
Address: 3243 RIVER RD.
City-St-Zip: GREENB COVE SPRGS.FL,

Title: PST () Delete
Name: CREWS, JAMES WALTER,
Address: 3243 RIVER RD.
City-St-Zip: GREEN COVE SPRGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES W. CREWS

D

04/15/2004

Electronic Signature of Signing Officer or Director

Date