## **2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # N03000006503



## **FILED** Mar 22, 2006 8:00 am Secretary of State 03-22-2006 90009 031 \*\*\*\*61.25

CRAIG BUSINESS PARK ASSOCIATION, INC.											
Principal Place of Business 10526 CRAIG INDUSTRIAL DRIVE JACKSONVILLE, FL 32235  Mailing Address 10526 CRAIG INDUSTRIAL DRIVE JACKSONVILLE, FL 32235						/E	ąv.	yaaa-			
Principal Place of Business     3. Mailing Address											
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.			03092006	Chg-NP	CR2E0	37 (11/05)	
City & State			City	City & State			4. FEI Numbe 20-0730				oplied For ot Applicable
Zip	Country		Zip	Zip Cou		intry	5. Certificate of Status Desired See Required Fee Required			ditional	
	6. Name	and Address of Current	Registered	Agent			7. Name and	Address of New f	Registered .	Agent	
MOORE	IONNY D					Name					
MOORE, JONNY D 10526 CRAIG INDUSTRIAL DRIVE JACKSONVILLE, FL 32235			Street Addres		s (P.O. Box Numbe	r is Not Acceptabl	(e)		,		
						City			FL	Zip Cod	e
8. The above the obligat	named entity tions of registe	submits this statement for	or the purpo	se of changing its	registere	ed office or regist	tered agent, or both	n, in the State of FI		familiar with,	and accept
SIGNATURE .	Signature, typed o	or printed name of registered agent	t and title if applic	cable. (NOTE	: Registere	d Agent signature requir	ired when reinstating)		DATE	·	
Filing Fee is \$61.25 Due by May 1, 2006				9. Election Campaign Financing Trust Fund Contribution.							
	_					~ —	\$5.00 May Be Added to Fees			c payable to tment of St	
10.	Due by Ma		RECTORS			~ —	Added to Fees		rida Depar	tment of S	tate
TITLE	PD PD	ay 1, 2006 OFFICERS AND DIE	RECTORS		11.	ion.	Added to Fees	Flo	rida Depar	tment of S	tate
TITLE NAME	PD MOORE, J	ay 1, 2006  OFFICERS AND DIF		Trust Fund C	11. TITLE	ion.	Added to Fees	Flo	rida Depar	tment of S	tate
TITLE	PD MOORE, J	ay 1, 2006 OFFICERS AND DIE	P.O. BOX	Trust Fund C	11. TITLE NAMI	ion.	Added to Fees	Flo	rida Depar	tment of S	tate
TITLE NAME STREET ADDRESS	PD MOORE, J 10526 CRA JACKSON' STD	OFFICERS AND DII ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579	P.O. BOX	Trust Fund C	11. TITLE NAMI	E E ET ADDRESS	Added to Fees	Flo	rida Depar	tment of S	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579	P.O. BOX	Trust Fund C	11. TITLE NAMI STRE CITY TITLE	E E ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	tment of Si	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA	OFFICERS AND DII ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579	P.O. BOX 9 P.O. BOX	Trust Fund C	11. TITLE NAM STRE CITY TITLE NAM STRE	E E ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	tment of Si	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON'D D	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579	P.O. BOX 9 P.O. BOX	Trust Fund C	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE TITLE	E E ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	tment of Si	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J.	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 WASON SCOTT	P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E E ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of Si RECTORS IN Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E E ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of Si RECTORS IN Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E E ET ADDRESS -ST-ZIP : E E ET ADDRESS -ST-ZIP : E E ET ADDRESS -ST-ZIP : E ET ADDRESS -ST-ZIP : E ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of Si RECTORS IN Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY	E E ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP E E ST-ZIP	Added to Fees	Flo	rida Depar	trinent of Si RECTORS IN Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579	TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E E ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of Si RECTORS IN Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579  Delete	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY	E E ET ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP E E ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of St RECTORS IN Change Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579	TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE TITLE NAMI STRE CITY TITLE	E E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Added to Fees	Flo	rida Depar	trinent of Si RECTORS IN Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579  Delete	TITLE NAMI STRE CITY	E E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Added to Fees	Flo	rida Depar	trinent of St RECTORS IN Change Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579  Delete	TITLE NAME STREE CITY TITLE NAME STREE STREE	E E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Added to Fees	Flo	rida Depar	trinent of St RECTORS IN Change Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  350579  Delete	TITLE NAMI STRE CITY	E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of St RECTORS IN Change Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  Delete	TITLE NAMI STRE CITY	E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E T ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Added to Fees	Flo	rida Depar	trinent of St RECTORS IN Change Change Change	Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOORE, J 10526 CRA JACKSON' STD MOORE, B 10526 CRA JACKSON' D MOORE, J. 10526 CRA	OFFICERS AND DIE ONNY D AID INDUSTRIAL DR. VILLE, FL 322350579 BARBARA A AID INDUSTRIAL DR. VILLE, FL 322350579 IASON SCOTT AID INDUSTRIAL DR.	P.O. BOX P.O. BOX P.O. BOX	Trust Fund C  Delete  350579  Delete  350579  Delete  Delete	ONITIOUTI  TITLE NAMI STRE CITY TITLE NAMI STRE	E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP	Added to Fees	Flo	rida Depar	trinent of St RECTORS IN Change Change Change	Addition  Addition  Addition

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 617, 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:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR