

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089160

FILED  
Jan 19, 2004  
Secretary of State

Entity Name: CRAIG CONSTRUCTION & RESTORATION, INC.

## Current Principal Place of Business:

2770 S. HORSEHOE DRIVE BLDG 2 STE 4  
NAPLES, FL 34104

## New Principal Place of Business:

306 CITATION POINT  
NAPLES, FL 34104

## Current Mailing Address:

2770 S. HORSEHOE DRIVE BLDG 2 STE 4  
NAPLES, FL 34104

## New Mailing Address:

306 CITATION POINT  
NAPLES, FL 34104

FEI Number: 59-3672310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CRAIG, PATRICIA  
2770 S. HORSEHOE DRIVE BLDG 2 STE 4  
NAPLES, FL 34104

## Name and Address of New Registered Agent:

CRAIG, PATRICIA  
306 CITATION POINT  
NAPLES, FL 34104

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:

01/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D/P ( ) Delete  
Name: CRAIG, THOMAS R  
Address: 1325 DIANA AVE  
City-St-Zip: NAPLES, FL 34103

Title: D/V ( ) Delete  
Name: CRAIG, RICHARD D  
Address: 1325 DIANA AVE  
City-St-Zip: NAPLES, FL 34103

## 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: THOMAS R CRAIG

D/P

01/19/2004

Electronic Signature of Signing Officer or Director

Date