## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000085836

Entity Name: CREWS AND CREWS, INC.

FILED Apr 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5972 CALEB TRAIL P.O. BOX 772

MACCLENNY, FL 32063 HOLLISTER, FL 32147

Current Mailing Address: New Mailing Address:

5972 CALEB TRAIL P.O. BOX 772

MACCLENNY, FL 32063 HOLLISTER, FL 32147

FEI Number: 04-3768544 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CREWS, PHILLIP D 904 SOUTH SR 19 PALATKA, FL 32177 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

Title: PTD () Delete Title: Name: CREWS, PHILIP D Name:

 Name:
 CREWS, PHILIP D
 Name:
 CREWS, PHILIP D

 Address:
 5972 CALEB TRAIL
 Address:
 P.O. BOX 772

 City-St-Zip:
 MACCLENNY, FL 32063
 City-St-Zip:
 HOLLISTER, FL 321

ity-St-Zip: MACCLENNY, FL 32063 City-St-Zip: HOLLISTER, FL 32147

Title: SVD ( ) Delete Title: SVD (X) Change ( ) Addition Name: CREWS, JUDITH A Name: CREWS, JUDITH A

 Address:
 5972 CALEB TRAIL
 Address:
 P.O. BOX 772

 City-St-Zip:
 MACCLENNY, FL 32063
 City-St-Zip:
 HOLLISTER, FL 32147

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: PHILLIP D. CREWS PTD 04/10/2005