

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000144085

Entity Name: CRANFORD KORNER STORE, INC.

FILED
Jul 27, 2006
Secretary of State

Current Principal Place of Business:

2700 E LEELAND HGTS BLVD
LEHIGH ACRES, FL 33972 US

New Principal Place of Business:

Current Mailing Address:

2700 E LEELAND HGTS BLVD
LEHIGH ACRES, FL 33972 US

New Mailing Address:

FEI Number: 20-0454856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, LASCELLES G SR
2700 E LEELAND HGTS BLVD
LEHIGH ACRES, FL 33972 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WATSON, LASCELLES G JR
Address: 2700 E LEELAND HGTS BLVD
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VPD (X) Delete
Name: WATSON, LASCELLES G SR
Address: 2700 E LEELAND HGTS BLVD
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,T (X) Change () Addition
Name: WATSON, LASCELLES SR
Address: 2700 E LEELAND HGTS BLVD
City-St-Zip: LEHIGH ACRES, FL 33972 US

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 Chapter 119, 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: LASCELLES WATSON SR

P,T

07/27/2006

Electronic Signature of Signing Officer or Director

Date