

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000035787

Entity Name: SUNCRAFT, INC.

FILED
Sep 03, 2006
Secretary of State

Current Principal Place of Business:

P. O. BOX 6328
MIRAMAR BCH, FL 32550

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 6328
MIRAMAR BCH, FL 32550

New Mailing Address:

FEI Number: 13-4268823

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALFORD, HOLLY
4317 CARRIAGE LANE
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

HALFORD, HOLLY
3021 CLUB DRIVE
MIRAMAR BEACH, FL 32550 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:

09/03/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HALFORD, DARRYL
Address: P. O. BOX 6328
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: SEC. () Delete
Name: HALFORD, HOLLY
Address: 4317 CARRIAGE LN.
City-St-Zip: DESTIN, FL 32451 US

Title: O () Delete
Name: DAWSON, GREG
Address: 11 JONQUIL AVE. NW
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SEC. (X) Change () Addition
Name: HALFORD, HOLLY
Address: 3021 CLUB DRIVE
City-St-Zip: MIRAMAR BEACH, FL 32550 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: DARRYL HALFORD

PRES

09/03/2006

Electronic Signature of Signing Officer or Director

Date