

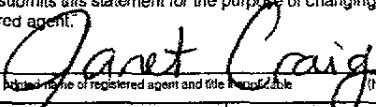
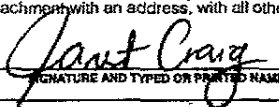


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000060309		
1. Entity Name JANET CRAIG, P.A.		
Principal Place of Business 32435 JOY HAVEN RD LEESBURG, FL 34788		Mailing Address 32435 JOY HAVEN RD LEESBURG, FL 34788
DO NOT WRITE IN THIS SPACE		
		
07202007 No Chg-P CR2E034 (11/05)		
4. FEI Number 20-2797349		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CRAIG, JANET 32435 JOY HAVEN RD LEESBURG, FL 34788		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE:  <small>Signature, typed or printed name of registered agent and title Principal (Note: Registered Agent signature required when reinstating)</small>		DATE: 8/15/07
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD CRAIG, JANET 32435 JOY HAVEN RD LEESBURG, FL 34788	
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DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  JANET CRAIG <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE: 8/15/07 (352) 217-8390 <small>Daytime Phone #</small>