## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000073570

Entity Name: CRAFT CORP.

FILED Apr 21, 2008 Secretary of State

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

1313 LEAWOOD ROAD ENGLEWOOD, FL 34223

**Current Mailing Address: New Mailing Address:** 

PO BOX 494134 PO BOX 219

PORT CHARLOTTE, FL 339494134 ENGLEWOOD, FL 342950219

FEI Number: 20-4955019 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:

CRAFT, AMBER N CRAFT, AMBER N CEO 1313 LÉAWOOD RD 1313 LÉAWOOD RD ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223

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: AMBER N. CRAFT, CEO 04/21/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition CFO ( ) Delete Title: CFO

CRAFT, AMBER N CRAFT, AMBER N Name: Name: POB 494134 Address: PO BOX 219 Address:

City-St-Zip: PORT CHARLOTTE, FL 339494134 City-St-Zip: ENGLEWOOD, FL 342950219

I hereby certify that the information supplied with this filing does not qualify 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: AMBER N. CRAFT, CEO CEO 04/21/2008

Electronic Signature of Signing Officer or Director

Date