

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000042135

Entity Name: COMFORT CRAFT, INC.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

747 COMMERCE CIRCLE
SUITE B
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 520638
LONGWOOD, FL 32752 US

New Mailing Address:

FEI Number: 59-3200463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAFT, JAMES Z
1200 SECOND PL
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

CRAFT, JAMES Z
747 COMMERCE CIRCLE
LONGWOOD, FL 32750 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:

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRAFT, JAMES Z
Address: 1200 SECOND PL
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: HARVEY, CHARLOTTE M
Address: 1200 SECOND PL
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: CRAFT, ELIZA
Address: 145 EDGEWATER CIRCLE
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRAFT, JAMES Z
Address: 747 COMMERCE CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change () Addition
Name: HARVEY, CHARLOTTE M
Address: 747 COMMERCE CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change () Addition
Name: CRAFT SUBER, ELIZA
Address: 747 COMMERCE CIRCLE
City-St-Zip: LONGWOOD, FL 32750

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: ELIZA CRAFT SUBER

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date