3 24-47 6-3462 NC FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000054270 (2)

CRAVER BUILDERS, INC.

FILED Mar 24 1997 8:00am Secretary of State



Principal Price of Business Mailing Address 1275 S PATRICK DR 1275 S PATRICK DR SATELLITE BEACH FL 32937 SATELLITE BEACH FL 32937-3										
						3. Date Incorporated or Qualifie 08/05/1993		ate of Las 13/199		/
2. Principal Place of Business 2a. Mailing A 21 26			Address			4. FEI Number 59-3197994		Applied For Not Applicable		
Suite Apt		27				5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
Gry & Sm 23]	,	City & State 28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Ζφ 24]	Country [25] 9. Name and Address of Cu	Zip 29 rrent Registered Agent	29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent				
JAC	OBY, KENNETH N P.A.	Tent negloteled Agent		81	Name	(g. Name and Address of their	Unflictoren	- Sein		
142	3 S. PATRICK DRIVE		82		Street Add	Address (P.O. Box Number is Not Acceptable)				
SATELLITE BEACH FL 32937			;		·					
				84	City		FL	85	ip Code	
SIGNATURE	DV		(hO'') Rogisten	ed Age		ired when relistating) ADDITIONS/CHANGES TO OF	DATE FICERS ANI	D DIREC		,
NAME STREE ACCRECA CODESS 765	CRAVER, TED 540 ROOSEVELT DR SATELLITE BEACH FL				ADDRESS 1-7IP					
FOLE NEMS STREET ADDRESS	DP CRAVER, TIM 149 PARK AVE SATELLITE BEACH FL	DELETI	E 21T 22 h 2.3 S	2 1 TITLE 22 NAME 2.3 STREET ADDRES 2 4 CITY - ST - ZIP 3 1 TITLE 32 NAME 33 STREET ADDRES 3 4 CITY - ST - ZIP				☐ Char	ge Ado	dition
CLY\$5-76* FILE NAME STEELLADORESS -CHY-\$5-76		DETEAL	E 317 32 M 33 S					☐ Chan	ge 🔲 Add	dition
TIPLE NAME SIRRELAIN COSS CAYOST VIII		Delen	E 4.1 T 4. 2 4.3 5	ITLE NAME STREET	ADORESS ST-ZIP			☐ Char	ge Ado	dition
THE NAME SPREEL ALIDNESS CITY-SE-7		[] OFEFT	E 5.1 T 5.2 t 5.3 \$	ITLE JAME SIREFT	ADDRESS IT-ZIP			☐ Char	ge Add	dikon
THEF NAME SHEELE ACTIONS (CEV-S) 200		DELET	E 611 6.21 6.35 6.40	ITLE IAME ITREE I	ADDRESS	ud in Spalier 110 (17/9Vi) Elorida Stal		☐ Char		dition

recorded y contry that the information supplied with his filling does not quality for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indirected on this acquait report or supplied entail annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that Ham an officer of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block. 13 if changed, or on an attachment with an address

D. Cracer V. President

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