


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000069867
 1. Entity Name
CROW INDUSTRIES, INC.



Principal Place of Business Mailing Address
2106 LIONS CLUB RD **13821 87TH AVENUE NORTH**
UNIT 1 **SEMINOLE, FL 33776-2222**
CLEARWATER, FL 33764

DO NOT WRITE IN THIS SPACE



01172008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3397298	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CROW, PHILLIP T
13821 87TH AVE N
SEMINOLE, FL 33776-2222

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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

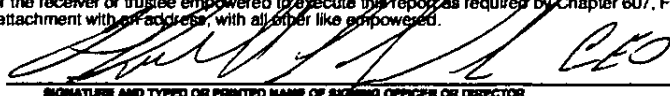
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO CROW, PHILLIP T SR 13821 87TH AVENUE NORTH SEMINOLE, FL 337762222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CROW, MURIEL J 13821 87TH AVENUE NORTH SEMINOLE, FL 337762222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CROW, PHILLIP T JR 9025-122ND AVE N LARGO, FL 337734317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROMANO, DANIEL E 8807 MAY CIR TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/29/08-80018-009 158.75

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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:  **CEO** 01/17/08 (727) 535-8001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

PHILLIP T. CROW, SR.