

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000054345

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: CRABTREE REAL ESTATE CORPORATION

## Current Principal Place of Business:

6756 RAMOTH DRIVE  
JACKSONVILLE, FL 32226

## New Principal Place of Business:

2045 NORTH LIBERTY STREET  
JACKSONVILLE, FL 32206

## Current Mailing Address:

6756 RAMOTH DRIVE  
JACKSONVILLE, FL 32226

## New Mailing Address:

2045 NORTH LIBERTY STREET  
JACKSONVILLE, FL 32206

FEI Number: 59-3454796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHULTZ, CHAD CPA  
1309 ST. JOHNS BLUFF ROAD NORTH  
104  
JACKSONVILLE, FL 32225 US

## Name and Address of New Registered Agent:

CRABTREE, WILLIAM PRES  
2045 NORTH LIBERTY STREET  
JACKSONVILLE, FL 32206 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: WILLIAM T. CRABTREE

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: CRABTREE, WILLIAM T  
Address: 6756 RAMOTH DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: D ( ) Delete  
Name: CRABTREE, WILLIAM E  
Address: 6756 RAMOTH DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: CRABTREE, JERRY A  
Address: 6756 RAMOTH DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: CRABTREE, WILLIAM T  
Address: 2045 NORTH LIBERTY STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VP (X) Change ( ) Addition  
Name: CRABTREE, WILLIAM E  
Address: 2045 NORTH LIBERTY STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: SEC (X) Change ( ) Addition  
Name: CRABTREE, JERRY A  
Address: 2045 NORTH LIBERTY STREET  
City-St-Zip: JACKSONVILLE, FL 32206

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: WILLIAM T. CRABTREE

PRES

04/16/2007

Electronic Signature of Signing Officer or Director

Date