2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105120

Entity Name: CRAIG FAMILY CORPORATION

FILED Mar 09, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	L POINCIANA I ACH, FL 33480				
Current Mailing Address:			New Mailing Address:		
	L POINCIANA I ACH, FL 33480				
FEI Number: 52-2143686 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
HAMBY, LOUIS L III 321 ROYAL POINCIANA PLAZA PALM BEACH, FL 33480 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.					
SIGNATU					
	Electroni	ic Signature of Registered Age	ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () CRAIG, WILLIAN 2529 HUNTER N OAKTON, VA 22	/ILL RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () HILGENDORFF, 179 RIVER EDG CHATHAM, NJ (E DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () LYNCH, CATHLE 15 STEVEN PLA SMITHTOWN, N	CE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CRAIG, DIANE M 33 BILLINGS ST W. ROXBURY, N	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () TOBIN, ANNE C 3 PENN TERRA	Delete CE	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: WILLIAM F. CRAIG, JR. PD 03/09/2005

CHATHAM, NJ 07928

City-St-Zip: