2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063515

Entity Name: CRAFT ELECTRIC INC.

City-St-Zip:

ARCHER, FL 32618

FILED Mar 31, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3210 SW 40TH BLVD SUITE F GAINESVILLE, FL 32608 **New Mailing Address: Current Mailing Address:** 3210 SW 40TH BLVD SUITE F GAINESVILLE, FL 32608 FEI Number: 59-3594719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALGEO, STEVE 14221 S.W. 83RD TERR. ARCHER, FL 32618 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ALGEO, STEVE Name: Name: 14221 SW 83 TERR Address: Address: City-St-Zip: ARCHER, FL 32618 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: ALGEO, MARY ANN Name: 14221 SW 83 TERR Address: Address: City-St-Zip: ARCHER, FL 32618 City-St-Zip: () Delete Title: Title: () Change () Addition ALGEO, ROBERT D Name: Name: 14221 SW 83 TERR Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: STEVE ALGEO P 03/31/2008