

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S63573

Entity Name: FRANK CRAWFORD, INC.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

11220-16 METRO PKWY
FORT MYERS, FL 33912 US

New Principal Place of Business:

6360 TECHSTER BLVD.
SUITE 1
FORT MYERS, FL 33966 US

Current Mailing Address:

14650 DOUBLE EAGLE CT
FT. MYERS, FL 33912 US

New Mailing Address:

14650 DOUBLE EAGLE CT
FT. MYERS, FL 33966 US

FEI Number: 65-0269226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, FRANK W.
11220-16 METRO PKWY
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

CRAWFORD, FRANK W.
6360 TECHSTER BLVD
SUITE1
FORT MYERS, FL 33966 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:

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRAWFORD, FRANK W.,
Address: 14650 DOUBLE EAGLE CT
City-St-Zip: FORT MYERS, FL 33912

Title: VPT () Delete
Name: CRAWFORD, CAROLYN
Address: 14650 DOUBLE EAGLE CT
City-St-Zip: FT. MYERS, FL

Title: S () Delete
Name: KLINE, R. S
Address: 11220-16 METRO PKWY
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CRAWFORD, FRANK W.,
Address: 14650 DOUBLE EAGLE CT
City-St-Zip: FORT MYERS, FL 33966

Title: VPT (X) Change () Addition
Name: CRAWFORD, CAROLYN
Address: 14650 DOUBLE EAGLE CT
City-St-Zip: FT. MYERS, FL 33966

Title: S (X) Change () Addition
Name: KLINE, R. S
Address: 6360 TECHSTER BLVD., SUITE 1
City-St-Zip: FORT MYERS, FL 33966

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.

SIGNATURE: CAROLYN CRAWFORD

VPT

04/21/2008

Electronic Signature of Signing Officer or Director

Date