FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

M66521

(9)

GRANDA CRANE CO., INC.

| Principal Place of Business Multing Address | | | | | | r is diadia the divid dilet dille in | . | | |
|---|---|--|---|--------------------|---------------|--|---------------|-------------|--------------|
| % DONALD 8636 HEATH | % DONALD E. GRAF 8636 HEATHER BLV | 6 HEATHER BLVD. | | | | | | | |
| BROOKSVILI | LE FL 34613 | weeki wachee Fl. Us | WEEKI WACHEE FL 34613 US | | | 3. Date Incorporated or Qualified 3a. Date of East Report 02/01/1988 04/27/1995 | | | |
| • Dissipal Dis | | 2a. Mailing Address | | | | 4. FEI Number | <u> </u> | 74/217 | Applied For |
| 2. Principal Place of Business | | · · · | 26 | | | 59-2869252 Not Applicable | | | · |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | \$8.75 Additional | | | 5 Additional |
| 22 | | 27 | 27 | | | 5. Cert licate of Status Desired Fee Required | | | |
| City & State | | Orty & State | | | | 6. Election Campaign Financing \$5.00 May Be | | | |
| 23 | | 28 | | | | Trust Fund Contribution Added to Fees | | | |
| Ζφ | Country | Zip | 30 Coun | try | | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes | | | |
| 24 | 25 29 29 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | |
| | g. Name and Address of Conten | it negistered Agent | | B1 N | lame | 70. | - 5 | -3 | |
| CDANO | A DOMAID E | | | - 1 | | (O.C. Flack) who is blot Assertib | la: | | |
| | A, DONALD E. EATHER BLVD. | | l' | 82 8 | Street Addre | ddress (P.O. Box Number is Not Acceptable; | | | |
| | SVILLE FL 34613 | | 1 | B3 | | | | ** | |
| Bricon | OTILLE I E OTO IO | | Ļ | 04 (| Nie . | | . | 85 Z | ip Code |
| | | | | 84 (| City | | FL | | ip code |
| or registere familiar with | d agent, or both, in the State of Flori , and accept the obligations of, Sec sprake, specionary by the correspondent upon | da, Such change was authoro bon 607 0505, Flooda Statute and the majorinary (F | zed by the cr s. OTE Registration | огрека | ition's bourd | | DIFITMENT 219 | registere | agent. Fam |
| 12. | <u> </u> | D DIRECTORS | 13. | | r · · | ADDITIONS/CHANGES TO OFF | | DIRECT | |
| TITLE | D | ☐ DELETE | 1. 1 111 | | | | ı | | L. Addition |
| NAME | Granda, Donald E. 8636 Heather Blvd. | | 1.2 NAME 1.3 STREI | | DEC. O | | | | |
| STREET ADDRESS | BROOKSVILLE FL | | | Y-S1-2 | | | | | |
| CITY-S1-ZIP TITLE | D Drivorovice TE | [] DELETE | 2 1 1/1 | | | | | Change | Addition |
| NAME | COSTION, MICHAEL J. | Backel | 2.2 NA | ME | | | | | |
| STREET ADDRESS | 716 LAURA | | 23 \$16 | REET AO | DRESS | | | | |
| CITY - ST - ZIP | SHOREWOOD IL | | 2.4 CH | Y - ST - Z | ?IP | | | | |
| TITLE | D | ☐ DELETE | 3 1 0 | l. E | | | ļ | Change | Addition |
| NAME | GRANDA, BARBARA C. | | 3 ? NA | ME | | | | | |
| STREET ADDRESS | 8636 HEATHER BLVD. | | | | DORESS | | | | |
| CITY - ST - ZIP | BROOKSVILLE FL | | | Y - \$1 - 2 | 715 | | | Change | • Mddion |
| TITLE | | ☐ DELETE | 4 1 1/1 | | | | | Charlys | Addition |
| NAME | | | 4 2 NA | | a de trac | | | | |
| STREET ADDRESS | | | | HEET AD 'Y-S'-1 | | | | | |
| CITY-ST-ZIP TITLE | | ☐ DELFTE | 5 11 | | (ir | | | Change | e Addition |
| NAME | | | 5.2 N4 | | | | , | | - |
| STREET ADDRESS | | | | REET AC | DRESS | | | | |
| CITY-ST-ZIP | l | | | Y-SI-7 | | | | | |
| TITLE | | ☐ DELETE | 6 1 1 | | | | | Change | Addition |
| NAME | | | 6.2 AA | MΕ | | | | | |
| STREET ADDRESS | | | €351 | REELAD | DDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 C | 14-51- | Z-P | | | | |

14. Ido hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an articress

SIGNATURE: N.

Land Da Branda Presidat 4/2496 352-596-6978
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR