

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

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Matheson Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000064752 (6)

1. Corporation Name

B & B CRANE SERVICE, INC.

Principal Place of Business

4411 BEE RIDGE ROAD
SARASOTA FL 34233

Mailing Address

4411 BEE RIDGE ROAD
SARASOTA FL 34233

2. Principal Place of Business

21 3875 DAVIS BLVD.

2a. Mailing Address

26 3875 DAVIS BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Sarasota, FL

27 City & State

28 Sarasota, FL

24 34232 25 USA

29 34232 30 USA

9. Name and Address of Current Registered Agent

BARFIELD, TRAVIS L
4411 BEE RIDGE ROAD
SARASOTA FL 34233

3. Date Incorporated or Qualified

08/29/1994

3a. Date of Last Report

4. FEI Number

05-0528914

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name Travis L. Barfield

82 Street Address (P.O. Box Number is Not Acceptable)
3875 DAVIS BLVD.

83

84 City Sarasota

FL

85 Zip Code

34232

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Travis Barfield

Travis Barfield

4-20-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BARFIELD, TRAVIS L
STREET ADDRESS	3875 DAVIS BLVD.
CITY, ST, ZIP	SARASOTA FL 34232
TITLE	D
NAME	BARFIELD, OID L
STREET ADDRESS	3875 DAVIS BLVD.
CITY, ST, ZIP	SARASOTA FL 34232
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and deemed not equally for the exemptions stated in Sections 119.07(3)(b), 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. 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 address.

SIGNATURE:

Travis L Barfield Pres.

TRAVIS L. BARFIELD

4-20-95

813-366-1288