DOCUMENT # P99000052504

1. Entity Name

CRANE CONSTRUCTION OF JACKSONVILLE, INC.

FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90107 003 ***150.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1548 SEAGATE AVENUE JACKSONVILLE BEACH FL 32250	P.O. BOX 61762 JACKSONVILLE FL 32236

2. Principal Place of Business		3. Mailing Address	
1735 N. Lane Ave			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Jacksonville, FL		City & State	
Zip: 32254	Country: U.S.	Zip	Country

4. FEI Number 59-3581229 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOLBROOK, H. LEON III ONE INDEPENDENT DRIVE SUITE 2301 JACKSONVILLE FL 32202	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	☒ Delete	TITLE	S/T	☐ Change ☒ Addition
NAME	JOHNSON, JOANN W		NAME	Deanna Hutsell	
STREET ADDRESS	1548 SEAGATE AVENUE		STREET ADDRESS	8156 Hastings St.	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250		CITY-ST-ZIP	Jacksonville, FL 32220	
TITLE	D	☐ Delete	TITLE	P	☐ Change ☒ Addition
NAME	THAYER, MATHEW		NAME	Robert Johnson Jr.	
STREET ADDRESS	1548 SEAGATE AVENUE		STREET ADDRESS	1548 Seagate Ave	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250		CITY-ST-ZIP	Jacksonville Beach, FL 32250	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deanna Hutsell Deanna Hutsell 1/8/01 (904)786-5244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #