

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000003913

Entity Name: CRANE HOLDINGS, CO.**Current Principal Place of Business:**100 FIRST STAMFORD PL #300
STAMFORD, CT 06902**Current Mailing Address:**100 FIRST STAMFORD PL #300
STAMFORD, CT 06902 US**FEI Number:** 88-0706021**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BENANTE, MARTIN R
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name HAIME, ELLEN MCCLAIN
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name MCCLURE, CHARLES G
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name POLLINO, JENNIFER
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name DINKINS, MICHAEL
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name LINDSAY, RONALD C
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR, PRESIDENT, CEO
Name MITCHELL, MAX H
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name TULLIS, JAMES L L
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

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I hereby 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 all other like empowered.

SIGNATURE: NASRUDEEN ALLADEEN**ASSISTANT TREASURER 03/08/2023
& ASSISTANT
SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STROUP, JOHN S
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title CFO
Name MAUE, RICHARD A
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title ASSISTANT TREASURER & ASSISTANT
 SECRETARY
Name ALLADEEN, NASRUDEEN
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title SECRETARY
Name D'IORIO,, ANTHONY M
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902

Title TREASURER
Name SWITTER, EDWARD S.
Address 100 FIRST STAMFORD PL #300
City-State-Zip: STAMFORD CT 06902