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Corporation Report and Tax Return

Filed on 6-28-67

2 pgs

A-65770

Corporation Report and Tax Return for Foreign and Domestic Corporations

1st Copy

State of Florida
Secretary of State

Tallahassee, Florida
1001 JACKSON AVENUE

Refer to This Number
in All Correspondence

This return is due
on July 1

BLACK CROW AND EIDSWESS INC
CHARLES A BLACK
700 S E 3RD ST
GAINESVILLE FLA 32601

SECRETARY OF STATE
TALLAHASSEE FLORIDA

11-06-A-155770
06/17/51

1947

1. BLACK CROW AND EIDSWESS INC (General nature of business)
2. ENGINEERING
(Give exact name of corporation)

3. 1700 SE 3RD ST GAINESVILLE ALACHUA FLA
(Street or Post Office Box of principal place of business) (City) (County) (State)

4. a. W. B. CROW PRES GAINESVILLE FLA
(Officers-Name) (Title) (Address)

b. C. A. BLACK EXEC. VICE-PRES GAINESVILLE FLA

c. F. A. EIDSWESS EXEC. VICE-PRES GAINESVILLE FLA

d. B. C. WHITEMAN SEC-TREAS GAINESVILLE FLA

5. a. W. B. CROW GAINESVILLE FLA
(Directors - Name) (Law requires at least (3) three) (Address)

b. C. A. BLACK GAINESVILLE FLA

c. F. A. EIDSWESS GAINESVILLE FLA

d. A. P. BLACK GAINESVILLE FLA

6. W. B. CROW GAINESVILLE FLA
(Resident Agent Name) (Address)

7. Last meeting of Directors 4-26-67 8. Corporation Active? YES 9. If inactive, inactivity began (Month - Day - Year)
(Month - Day - Year) (Yes or No)

10. If inactive, will corporation begin business in the future? (Yes or No) 11. Date Incorporated 6-12-51 12. Date Qualified in Fla. (Month - Day - Year)
(Month - Day - Year) (Month - Day - Year)

13. Total Authorized Capital Stock:

(No. of shares with par value)	\$	(Par value each)
(No. of shares with par value)	\$	(Par value each)
(No. of shares without par or nominal value)		(Total amount raised)

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14. Outstanding Capital Stock: (issued)

(a)	(No. of shares with par value)	\$	(Par value each)	\$	(Total value)
(b)	(No. of shares with par value)	(Par value each)	(Total value)		
(c)	(No. of shares without par or nominal value)		(Total amount raised)		
(d) Total (a) + (b) + (c)		\$	(Total value)		

15. Amount of tax Due \$ 23.44

16. Less Credit Memo if any \$

17. Penalty and Interest (see instructions) \$

18. Amount of tax remitted with this return \$ 20.00

19. If foreign corporation, give amount of capital employed in Florida. \$

20. If foreign corporation, give the number of States in which you do business.

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

By President or V-President
STATE OF FLORIDA
COUNTY OF ALACHUA

Attest: William B. Crow
Secretary

Personally appeared before me WILLIAM B. CROW
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 26th day of JUNE 19 67.
(Notary Seal) James H. Wilson
Signature of Notary taking acknowledgment

Send Original (with Remittance) TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA
Send First copy to Secretary of State, Tallahassee, Florida
NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES SEPT. 23, 1967
(SEE INSTRUCTIONS ON BACK OF LAST COPY) BONDED THROUGH 1968 W. B. BERTHOUD