

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 07 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 223465 (6)  
1. Corporation Name  
CRAWLER RAIL & ROLLER CO.



Principal Place of Business  
15437 N. HWY 301  
DADE CITY FL 33525  
US

Mailing Address  
15437 N. HWY. 301  
DADE CITY FL 33525  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/08/1959

4. FEI Number

59-0930877

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

33523

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

33523

Country

30

9. Name and Address of Current Registered Agent

PREVATT, KAREN J ESQ  
201 N. FRANKLIN STREET, SUITE 2505  
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME CONE, MICHAEL L  
STREET ADDRESS 6735 S. LOIS AVENUE  
CITY-ST-ZIP TAMPA FL 33616

☐ DELETE

TITLE VS  
NAME SMITH, PEGGY  
STREET ADDRESS 6735 S. LOIS AVENUE  
CITY-ST-ZIP TAMPA FL 33616

☒ DELETE

TITLE D  
NAME PARKER, JEFFREY R  
STREET ADDRESS 6735 S. LOIS AVENUE  
CITY-ST-ZIP TAMPA FL 33616

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE VP  
12 NAME Warren Helms  
13 STREET ADDRESS 15437 N Hwy 301  
14 CITY-ST-ZIP Dade City, FL 33523

☐ Change ☒ Addition

21 TITLE AS  
22 NAME Margie Denney  
23 STREET ADDRESS 15437 N. Hwy 301  
24 CITY-ST-ZIP Dade City, FL 33523

☐ Change ☒ Addition

31 TITLE STD  
32 NAME Hal Kelly  
33 STREET ADDRESS 3901 S. Westshore Blvd.  
34 CITY-ST-ZIP Tampa, FL 33611

☐ Change ☒ Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 address.

SIGNATURE

WARREN HELMS  
4.29.98

CR2E034 (10/97)