

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90087 039 ***150.00

DOCUMENT # 392147

1. Entity Name
CROSBY EQUIPMENT COMPANY



Principal Place of Business
**5175 N US #1
COCOA FL 32927**

Mailing Address
**5175 N US #1
COCOA FL 32927**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1367999**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**CROSBY, C GORDON
59 CEDAR AVE
COCOA BEACH FL**

Name
Street Address (P.O. Box Number is Not Acceptable)
5175 N. Cocoa Blvd.
City **Cocoa** **FL** **32927**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BOAST, ALFRED**
STREET ADDRESS **134 MORRO**
CITY-ST-ZIP **PISMO BEACH CA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VSD** ☐ Delete
NAME **CROSBY, DOUGLAS M**
STREET ADDRESS **166 TORO CANYON RD**
CITY-ST-ZIP **CARPINTERIA CA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **CROSBY, C GORDON**
STREET ADDRESS **59 CEDAR AVE**
CITY-ST-ZIP **COCOA BEACH FL**

TITLE **PD** ☒ Change ☐ Addition
NAME **Crosby, C Gordon**
STREET ADDRESS **5175 N. Cocoa Blvd.**
CITY-ST-ZIP **Cocoa, FL 32927**

TITLE **D** ☐ Delete
NAME **WEEKS, GEORGE E**
STREET ADDRESS **46 TASEO LEARDO N.**
CITY-ST-ZIP **CATHEDRAL CITY CA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **CROSBY, KATHRYN M**
STREET ADDRESS **166 TORO CANYON RD**
CITY-ST-ZIP **CARPINTERIA CA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **AT** ☐ Delete
NAME **TER KEURST, ANGELA M**
STREET ADDRESS **6330 BETTY AVE**
CITY-ST-ZIP **COCOA FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angela M. Ter Keurst **321-636-5270**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)