

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 440885

Entity Name: D & D CRANE SERVICE, INC.

FILED  
Feb 15, 2006  
Secretary of State

## Current Principal Place of Business:

12033 ONEIDA DRIVE  
HUDSON, FL 34667

## New Principal Place of Business:

8504 AIRWAY BLVD  
NEW PORT RICHEY, FL 34654

## Current Mailing Address:

12033 ONEIDA DRIVE  
HUDSON, FL 34667

## New Mailing Address:

8504 AIRWAY BLVD  
NEW PORT RICHEY, FL 34654

FEI Number: 59-1489501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICHMOND (RONALD) R.  
1604 U.S. HIGHWAY 19 NORTH  
NEW PORT RICHEY, FL 33552 US

## Name and Address of New Registered Agent:

MATISSEK, JOSEPH  
8504 AIRWAY BLVD  
NEW PORT RICHEY, FL 34654 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: JOSEPH MATISSEK

02/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STOLEC, RICHARD W.,  
Address: 12033 ONEIDA DR.  
City-St-Zip: HUDSON, FL

Title: ST ( ) Delete  
Name: STOLEC, ARLYNE M.,  
Address: 12033 ONEIDA DR.  
City-St-Zip: HUDSON, FL

Title: V ( ) Delete  
Name: STOLEC, RICHARD A.,  
Address: 12033 ONEIDA DR.  
City-St-Zip: HUDSON, FL

Title: S (X) Delete  
Name: MUGNOLO, PATRICE J  
Address: 11100 MCKINLEY DR.  
City-St-Zip: PORT RICHEY, FL 34668

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MATISSEK, JOSEPH  
Address: 8504 AIRWAY BLVD  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: STD (X) Change ( ) Addition  
Name: MUGNOLO, SHANNON M  
Address: 11100 MCKINLEY DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: VD (X) Change ( ) Addition  
Name: MUGNOLO, PATRICK J  
Address: 11100 MCKINLEY DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH MATISSEK

PRES

02/15/2006

Electronic Signature of Signing Officer or Director

Date