

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 551363

FILED  
Apr 16, 2002 8:00 AM  
Secretary of State

**Entity Name:** CRANE TECHNICAL TRAINING AND INSPECTION, INCORPORATED

**Current Principal Place of Business:**

4951-B E ADAMO DR  
STE 238  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

4951-B E ADAMO DR  
STE 238  
TAMPA, FL 33605 US

**New Mailing Address:**

**FEI Number:** 59-1791896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDENFIELD, MICHAEL S. PAA  
206 MASON STREET  
BRANDON, FL 33511

**Name and Address of New Registered Agent:**

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PV ( ) Delete  
Name: COLLIER, CHARLES EDW, ARD  
Address: 3913 SABAL PALM CT.  
City-St-Zip: BRANDON, FL 33511 US

Title: ST ( ) Delete  
Name: COLLIER, LOUISE ANN,  
Address: 3913 SABAL PALM CT.  
City-St-Zip: BRANDON, FL 33511 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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 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: LOUISE A. COLLIER

ST

04/16/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date