

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 12, 2008**

DOCUMENT # A06000001514

1. Entity Name  
SANTA FE CRANE & RIGGING, LTD.



Principal Place of Business  
6740 HIGHWAY AVENUE  
JACKSONVILLE, FL 32254

Mailing Address  
6740 HIGHWAY AVENUE  
JACKSONVILLE, FL 32254

**FILED**  
**Jun 26, 2008 08:00 AM**  
**Secretary of State**



06202008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-8101967

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MOSELEY, PRICHARD, PARRISH, KNIGHT & JONES  
501 WEST BAY STREET  
JACKSONVILLE, FL 32202

**DO NOT WRITE  
IN THIS SPACE**

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

DATE

**FILE NOW!!! FEE IS \$500.00**  
**Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # L06000115458  
NAME JAX CRANE, LLC  
STREET ADDRESS 6740 HIGHWAY AVENUE  
CITY-ST-ZIP JACKSONVILLE, FL 32254

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06/26/08-80002-012 500.00

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

JOHN B. FAULKNER

Date

Daytime Phone #

STAPLE CHECK HERE