

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

FILED

Mar 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000002546 (7)**

1. Corporation Name

**THE COLRANE COMPANY, INC.**

Principal Place of Business

**1264 LAQUINTA DR  
ORLANDO FL 32809**

Mailing Address

**1264 LAQUINTA DR  
ORLANDO FL 32809**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/21/1996**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

**04-2821377**

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

9. Name and Address of Current Registered Agent

**CRUZ, DAVID  
1264 LAQUINTA DR  
ORLANDO FL 32809**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

**FL** B5 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	<b>DC</b>	<input type="checkbox"/> DELETE
NAME	<b>ANDERSON, ARTHUR W</b>	
STREET ADDRESS	<b>105 LARCHMONT ROAD</b>	
CITY-ST-ZIP	<b>MELROSE MA</b>	

TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>ANDERSON, ARTHUR J</b>	
STREET ADDRESS	<b>71 LARCHMONT ROAD</b>	
CITY-ST-ZIP	<b>MELROSE MA</b>	

TITLE	<b>DV</b>	<input type="checkbox"/> DELETE
NAME	<b>ANDERSON, MARK</b>	
STREET ADDRESS	<b>30 COUNTRY CLUB ROAD</b>	
CITY-ST-ZIP	<b>MELROSE MA</b>	

TITLE	<b>DT</b>	<input type="checkbox"/> DELETE
NAME	<b>SPENILLI, DONNA</b>	
STREET ADDRESS	<b>115 ELLIS FARM LANE</b>	
CITY-ST-ZIP	<b>MELROSE MA</b>	

TITLE	<b>VS</b>	<input type="checkbox"/> DELETE
NAME	<b>VETRANO, MICHAEL</b>	
STREET ADDRESS	<b>3 NOB HILL CIR</b>	
CITY-ST-ZIP	<b>ANDOVER MA 01810</b>	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>SPINELLI, DONNA</b>
4.3 STREET ADDRESS	<b>14 GENEVA ROAD</b>
4.4 CITY-ST-ZIP	<b>MELROSE, MA</b>

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 registered 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 in an attachment with an address.

SIGNATURE:

978-670-8806

CR2E034 (10/97)