## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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## Jul 14, 2004 8:00 am DOCUMENT # J05971 **Secretary of State** 1. Entity Name 07-14-2004 90005 004 \*\*\*150.00 ED'S CRANE SERVICE, INC. Principal Place of Business Mailing Address 3241 ASH STREET 3241 ASH STREET PUNTA GORDA FL 33950 PUNTA GORDA FL 33950 44048497 3. Mailing Address Mail Forms a Etc. 2. Principal Place of Business P.O. BOX 511663 Suite, Apt. #, etc. Suite, Apt. #, etc MOORE CR2E034 (4/04) City & State City & State Applied For 4. FEI Number 59-2649039 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 33951-1663 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SMITH, EDWIN H: Street Address (P.O. Box Number is Not Acceptable) 3241 ASH STREET **PUNTA GORDA FL 33950** Zip Code 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. D SEC. DP TITLE TITLE X Addition ☐ Delete smith, Edwin Nathan 2354 Beacon Dr. Change SMITH, EDWIN H. NAME NAME 3241 ASH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **PUNTA GORDA FL** CITY-ST-ZIP Port Charlotte Fl 33952 DV TITLE ☐ Delete ☐ Change ☐ Addition SMITH, MARY F. NAME 3241 ASH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL CITY-ST-ZIP 919 <u>539 9552</u> 91 + 41.0 TITLE TITLE Change ☐ Addition Delete NAME STREET ADDRESS STREET ADDRESS City-St-7JP CITY-ST-ZIP TITLE Delete TITI F ☐ Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Channe Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

with all other like empowered.

CER OR DIRECTOR

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Now Hom This May Concerns 7-12-04 I am mailing you a check for 150.00. as we never received nothing in the mail at all for this. I never realized it until I received your notice on : Notice Of Intent To Dissolve". el talked to Michelle at this number 850 245.6051 on 7.1.04 & 7.7.04 and she Daid that it wasn't our fault that we didn't get it (the form) or anything in the mail, and to send the I put our mail box number in at the -Post Office. If you would use it for mailing things to us. DV-Mary 7. Smith

P.S. D'z just received this form in the mail today
7/12.04, Please mail forms to us as we do not have the Internet, for on line.