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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # K43609**

(2)

CROWE	MANUFACTURING CO., INC	3 .			
Principa! Piace	of Business	Mailing Address		(AIBIT AIRIS AIRIT BIBIT BIBIT BIBIT TARS
1318 CHANNELSIDE DRIVE 708 N. 13TH ST TAMPA FL 33602 US		1318 CHANNELSIDE DRIVE 708 N. 13TH ST TAMPA FL 33602-3109 US			
				3. Date Incorporated or Qualified 11/01/1988	3a. Date of Last Report 04/26/1996
2. Principal Pla 21	soc of Business	2a. Mailing Address 26 /3/9 CHANA	ISLSINE DRIVE	4. FEI Number 65-0092010	Applied For Not Applicable
Suite Apt #	f etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City 8 State 23		City & State	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
74·	Country 25	2ip 29 3360 2	Country	8. This corporation has liability for	
. = 1	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
CROWE, PAUL W.			ROWE, PAUL W.		
708 N. 13TH ST			82 Street Addr	ess (P.O. Box Number is Not Acceptate	ole)
IAM	PA FL 33602		83	Citizen	777.12
			84 City		FL 85 Zip Code 2
	d and a file advance CO7 DE OC	Land CO7 1506 Florida Statut	B4 City	oration submits this statement for the p	
l office or re	e the provisions of Sections bor.coor agistered agent, or both, in the State in Lamit ar with, and accept the obliga	ol Florida. Such change was -	authorized by the corporat	ion's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE		r and the if applicable (NO)	t. Registered Agent signature requi-	ed when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
Tital	PD	DELETE	1.1 TITLE		Change Addition
NAME	CROWE, PAUL W.		1.2 NAME		
STREET ADORESS	1318 CHANNELSIDE DRIVE		1.3 STREET ADDRESS		ŀ
C(1) Y - S 1 2/01	TAMPA FL	DELETE	1 4 CHY-ST-ZIP 2 1 TITLE		Change Addition
TOTALE	SD Crowe, Hilton M.	[] orien	21 MAME		had orange notition
NAME SIRE:1 ADDRESS	1318 CHANNELSIDE DRIVE		2 3 STREET ADDRESS		
OTY SEZ	TAMPA FL		2 4 CHY-S1-ZIP		
11111		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET AODRESS			3.3 STREET ADDRESS		
CITY ST 7P			3.4 CITY-ST-ZIP		
1015.E		DELETE	4 1 TITLE		L Change L Addition
NAME			4. 2 NAME		
STREET ADDRESS.			4.3 STREET ADDRESS		
CHY-SI-70		DELETE	4.4 CITY - ST - ZIP		☐ Change ☐ Addition
1016 1016		E DECER	5.1 YITLE 5.2 NAME		C country C Mountain
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-7IP		
THE		DELETE	61 TITLE		Change Addition

14. It do 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 receiver or 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 on an attachment with an address

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - \$1 - ZIP

PAUL W. CRINE SIGNATURE

NAME

STREET ADDRESS

813 221-6279

FILED

Mar 21 1997 8:00am

Secretary of State