

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L66465

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Entity Name:** CRANE & EQUIPMENT CONSULTING, INC.

**Current Principal Place of Business:**

3704 CONWICK DR  
SOUTHPORT, FL 32409 US

**New Principal Place of Business:**

**Current Mailing Address:**

CRANE & EQUIPMENT CONSULTING  
PO OBX 1426  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 59-3014709      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MERCER, R. BRUCE  
3704 CONWICK DR  
PANAMA CITY, FL 32409 US

**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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MERCER, MARTHA  
Address: 3704 CONWICK DR  
City-St-Zip: SOUTHPORT, FL 32409

Title: STD  
Name: MERCER, BRUCE R  
Address: 3704 CONWICK DR  
City-St-Zip: SOUTHPORT, FL 32409

I hereby 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 all other like empowered.

SIGNATURE: R. BRUCE MERCER

STD

04/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date