## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000006601

FILED Apr 30, 2009 Secretary of State

Entity Name: FLORIDA CRANE OWNERS COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

170 N GOLDENROD ROAD ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

170 N GOLDENROD ROAD ORLANDO, FL 32807

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

HELLMAN, GARY M ESQ. 800 SOUTHEAST THIRD AVENUE FOURTH FLOOR FT LAUDERDALE, FL 33316 US

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:

Flateric Circular of Decideral Asset

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CD () Delete
 Title:
 CD (X) Change () Addition

 Name:
 WHITTEN, BRUCE
 Name:
 DEWHURST, JOHN

 Address:
 5217 N PINE HILLS RD
 Address:
 533 BUNKER ROAD

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: WEST PALM BEACH, FL 33405

Title: VC ( ) Delete Title: VC (X) Change ( ) Addition Name: DEWHURST, JOHN Name: RETTERATH, BOB

 Name:
 DEWHURST, JOHN
 Name:
 RETTERATH, BOB

 Address:
 533 BUNKER ROAD
 Address:
 POST OFFICE BOX 5705

 City-St-Zip:
 WEST PALM BEACH, FL 33405
 City-St-Zip:
 FT. LAUDERDALE, FL 33310

Title: S ( ) Delete Title: S (X) Change ( ) Addition Name: SIMS, ERICA Name: CONNOR, JANET

 Address:
 PO BOX 11825
 Address:
 3349 CUSTER AVENUE

 City-St-Zip:
 TAMPA, FL 33680
 City-St-Zip:
 LAKE WORTH, FL 33467

Title: T ( ) Delete Title: ( ) Change ( ) Addition
Name: KIRBY, MARTHA Name:

 Name:
 KIRBY, MARTHA
 Name:

 Address:
 170 N GOLDENROD ROAD
 Address:

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA D. KIRBY T 04/30/2009