2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 29, 2007 08:00 AM DOCUMENT # P00000018819 **Secretary of State** 1. Entity Name CAPPS CRANE SERVICE, INC. Principal Place of Business Mailing Address 107 RAMSEY CIR 107 RAMSEY CIR PORT ST. JOE, FL 32456 PORT ST. JOE, FL 32456 No Chg-P 01122007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3626573 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CAPPS, FREDDIE J DO NOT WRITE 107 RAMSEY CIR PORT ST. JOE, FL 32456 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE, Registered Agent signature required when reinstating) Hannansas²449 01/30/07-80079-012 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE CAPPS, FREDDIE J NAME STREET ADDRESS 107 RAMSEY CIR CITY-ST-ZIP PORT SAINT JOE, FL 32456 TITLE NAME CAPPS, BERTHA F 107 RAMSEY CIR STREET ADDRESS CITY-ST-ZIP PT. ST. JOE, FL 32456 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - 7IP TITLE

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 chapter 607, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Date Freddie J. Capps 1. 2207 (850) 227-5678