

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119445

FILED
Jan 13, 2009
Secretary of State

Entity Name: SOUTHEAST CRANE SERVICE INC.

Current Principal Place of Business:

7291 HONDA DR
JACKSONVILLE, FL 32222

New Principal Place of Business:

Current Mailing Address:

7291 HONDA DR
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 04-3779185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACE, TIMOTHY W SR
7291 HONDA DR
JACKSONVILLE, FL 32222 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC
813 DELTONA BLVD STE A
BOX 1376061
DELTONA, FL 32725 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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRACE, TIMOTHY W
Address: 7291 HONDA DR
City-St-Zip: JACKSONVILLE, FL 32222

Title: VP () Delete
Name: GRACE, EVELYN E
Address: 7291 HONDA DR
City-St-Zip: JACKSONVILLE, FL 32222

Title: VST () Delete
Name: SHEPPARD, VIRGINIA E
Address: 7291 HONDA DR
City-St-Zip: JACKSONVILLE, FL 32222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINA CLARK FOR TIMOTHY W GRACE

P

01/13/2009

Electronic Signature of Signing Officer or Director

Date