## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000134165

Address:

City-St-Zip:

8536 D.L. CROSBY LANE

TALLAHASSEE, FL 32305

Entity Name: CROSBY WELDING, INCORPORATED

FILED Feb 18, 2009 Secretary of State

| Current Principal Place of Business:        |   |                              | New Principal Place o                       | New Principal Place of Business:             |  |
|---|---|------------------------------|---|--|--|
|   | CROSBY LANE<br>LE, FL 32305                             |                              |   |  |  |
| Current Mailing Address:                    |   |                              | New Mailing Address:                        |  |  |
|   | CROSBY LANE<br>SSEE, FL 3230                            |                              |   |  |  |
| FEI Number                                  | : 83-0376462  | FEI Number Applied For ( )   | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and                                    | Address of C  | ırrent Registered Agent:     | Name and Address of                         | Name and Address of New Registered Agent:    |  |
| TALLAHAS The above                          | CROSBY LANE SSEE, FL 3230  named entity s               | 5 US                         | ourpose of changing its registered          | office or registered agent, or both,         |  |
| in the State                                | e of Florida.   | ·                            |   |  |  |
| SIGNATU                                     | RE:   |                              |   |  |  |
| Electronic Signature of Registered Agent    |   |                              | ent   | Date   |  |
| Election Car                                | mpaign Financing  | Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:                     |   |                              | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | V ()<br>CROSBY, DAVIE<br>8536 D.L. CROS<br>TALLAHASSEE, | BY LANE                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | P ()<br>CROSBY, SUSA<br>8536 D.L. CROS<br>TALLAHASSEE,  | BY LANE                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:                             | AS ()<br>CROSBY, NICHO                                  | Delete<br>DLAS               | Title:<br>Name:                             | ( ) Change ( ) Addition                      |  |

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.

Address:

City-St-Zip:

SIGNATURE: SUSAN CROSBY P 02/18/2009