2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000004978

City-St-Zip:

JACKSONVILLE, FL 32219

FILED Mar 09, 2006 Secretary of State

Entity Name: D & D CRANE, INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
8115 ACRI JACKSON	EE RD. VILLE, FL 32:	219			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8115 ACRI JACKSON	EE RD. VILLE, FL 32:	219			
FEI Number:	: 56-2424219	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SCHUSTER, DAVID E 8115 ACREE RD. JACKSONVILLE, FL 32219 US			8115 ACREÉ RD.	SCHUSTER, DAVID E OWNER 8115 ACREE RD. JACKSONVILLE, FL 32219 US	
The above in the State	named entity e of Florida.	submits this statement for the po	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: DAVID E. SCHUSTER				03/09/2006	
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (SCHUSTER, D 8115 ACREE F JACKSONVILL	RD.	Title: (Name: Address: City-St-Zip:)Change ()Addition	
Title: Name: Address: City-St-Zip:	VD (SCHUSTER, D 8115 ACREE F JACKSONVILL	RD.	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	TD (SCHUSTER, J		Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: DAVID E, SCHUSTER PD 03/09/2006