## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000074606

Entity Name: TWH CRANE SERVICE INC.

FILED Sep 09, 2008 Secretary of State

|   |   | AND CERTICE IIVO.   |   |  |  |
|---|---|---|---|--|--|
| Current Principal Place of Business:          |   |   | New Principal Place                         | New Principal Place of Business:             |  |
|   | DUGGER RE<br>SON, FL 3208                           |   |   |  |  |
| Current Mailing Address:                      |   |   | New Mailing Address                         | New Mailing Address:                         |  |
|   | DUGGER RE<br>SON, FL 3208                           |   |   |  |  |
| FEI Number                                    | : 20-2839917  | 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:    |  |
|   | PENNIE<br>DUGGER RE<br>SON, FL 3208                 |   |   |  |  |
|   | e named entity<br>e of Florida.                     | submits this statement for the  | purpose of changing its registere           | d office or registered agent, or both,       |  |
| SIGNATUI                                      |   |   |   |  |  |
|   | Electro   | nic Signature of Registered Ag  | ent   | Date   |  |
|   |   | 3(2)(b), F.S., the corporation did n<br>g Trust Fund Contribution (  ). | ot receive the prior notice.                |  |  |
| OFFICERS AND DIRECTORS:                       |   |   | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD (<br>HODGES, TIM<br>14399 HID DU<br>SANDERSON,   | GGER RD   | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VTS (<br>HODGES, PEN<br>14399 HID DUG<br>SANDERSON, | GGER RD   | Title:<br>Name:<br>Address:<br>City-St-Zip: | () 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.

SIGNATURE: TIMOTHY W. HODGES PRES 09/09/2008