

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18361

FILED
Feb 23, 2004
Secretary of State

Entity Name: SUNBELT CRANES, CONSTRUCTION & HAULING, INC.

Current Principal Place of Business:

6429 HARNEY RD
PO BOX 310007
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

6429 HARNEY RD
PO BOX 310007
TAMPA, FL 33610

New Mailing Address:

FEI Number: 59-2873662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANOWICZ, DONALD E
6429 HARNEY ROAD
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CTD () Delete
Name: GRANOWICZ, DONALD
Address: 6429 HARNEY RD
City-St-Zip: TAMPA, FL

Title: DP () Delete
Name: GRANOWICZ, VIC F
Address: 6429 HARNEY RD
City-St-Zip: TAMPA, FL 33610

Title: DS () Delete
Name: GRANOWICZ, CHRISTIE J
Address: 1220 APOLLO BEACH BLVD
City-St-Zip: APOLLO BEACH, FL 33572

Title: VD () Delete
Name: GRANOWICZ, DONNA
Address: 3314 CHEVIOT DR
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CTD (X) Change () Addition
Name: GRANOWICZ, DONALD
Address: 6429 HARNEY RD
City-St-Zip: TAMPA, FL 33610

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 for the exemption stated in Section 119.07(3)(i), 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: VIC F. GRANOWICZ

DP

02/23/2004

Electronic Signature of Signing Officer or Director

_____ Date