FILED Jun 17, 2004 8:00 am Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT Se

DOCUMENT # P37954						06-17-2004 90002 010 ***150.00				
1. Entity Name R.E. CRAWFORD CONSTRUCTION, INC.										
	16									
Principal Place of Business Mailing Address			ŀ		-			- 4 1	3 F H H O	n
1046 PITTSBURGH ST.		1046 PITTSBURGH ST.						541)5778	3
SPRINGDALE, PA 15144		SPRINGDALE, PA 15144								
	,				1				.IL Bib il e tbil bibi	1 11
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.						•		
Julio, Apt. #, 610.		oano, April 1, oto.				03192003	Chg-P	CR2E0	34 (10/03)	
City & State		City & State				4. FEI Numbe 25-1419			<u> </u>	plied For t Applicable
Zip Country		Zip Count			Certificate of Status Desired			¢9.75		
			·		3. Certificate of Status Desired Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
MARLOWE & MCNABB, P.A.				Street Address (P.O. Box Number is Not Acceptable)						
324 S. HYDE PARK AVENUE, SUITE 210 TAMPA, FL 33606			L`	Street Address (F.O. Box Number is Not Acceptable)						
: H				City:			•	FL	Zip Code	3
8. 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. I am familiar with, and accept										
the obligations of registered agent.										
SIGNATURE_	Signature, typed or printed riams of registered agent a	nd title if applicable. (NOTE: F	Registered Ac	gent signature	required	when reinstating)	* • •	DATE		
· · · · · ·	1			. :			,	·	 	
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5. Due by September 8, 2004 Trust Fund Contribution. Adde						00 May Be ed to Fees	In accordance corporation did	with s. 607 not receiv	.193(2)(b), l e the prior r	F.S., the notice
10.	OFFICERS AND I	DIRECTORS	11.			ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTORS	3 IN 11
TITLE	DCP ,	☐ Delete	TITLE	Ī	VΡ	7.000,10,	<u> </u>	. , , , , , , , , , , , , , , , , , , ,	☐ Change	Addition
NAME	CRAWFORD, ROBERT E.		NAME		Tom Chunchick					
STREET ADDRESS CITY-ST-ZIP	1046 PITTSBURGH ST SPRINGDALE, PA: 15144	STREE CITY-		ADDRESS]	1583 Hedy Lynn Drive North Huntingdon, PA 15642					
			TITLE	-21F 1	NOL	th nunt	ingdon,	PA		Addition
TITLE . ,	LITSCHGE, JOANNE L.			}					LT cuants	L' Anglition
STREET ADDRESS			STREET A	ADDRESS						į
CITY-ST-ZIP	PITTSBURGH, PA CI		CITY-ST	- ZIP						
TITLE	D	X Delete	TITLE]		_	,		Change	Addition
NAME STREET ADDRESS	ALVIN, LOU 11900 FRANKSTOWN RD.		NAME STREET A	ADDRESS						
CITY-ST-ZIP	I			- ZIP						
TITLE	VP	☐ Delete	TITLE						☐ Change	Addition
NAME	PADGETT, MATTHEW W.		NAME	1						
STREET ADDRESS	1127-61 AVE. NORTH		8	ADDRESS						
CITY-ST-ZIP	ST. PETERSBURG, FL	(7)	CITY-ST	-ZIP					Channe	- Addition
TITLE NAME	DCP THOMAS, LLEWELLYN	Delete	TITLE NAME	1					Change	☐ Addition
STREET ADDRESS	70 CHURCHILL RD		1	ADDRESS			e was			}
CITY-ST-ZIP	PITTSBURGH, PA-15235	'-'	CITY-ST	- ZIP	-	- · · · · · · · · · · · · · · · · · · ·				
TITLE		Delete ?···	TITLE NAME?"	en [n]	7.2	0.	1 6	אר פון דבן יי אין פון דבן יי	☐ Change	☐ Addition
-STREET ADDRESS		:	1	ADDRESS						
CITY-ST-ZIP .		en se unit	. CITY-ST		:_:	<u> </u>			<u> </u>	
12. I hereby o	certify that the information supplied with	this filing does not qualify for t	he exemp	otion stated	d in Se	ction 119.07(3)(i), Florida Statutes	. I further cer	tify that the in	nformation or director
12. I hereby certify that the information supplied with this filling does not qualify for the execuption 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 state and that my 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 for trusted empowered the execute this export as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other than the executed that the executed the executed the executed the executed the executed that the executed the executed the executed that the executed the executed the executed that the executed the executed that the executed the executed the executed the executed that the executed the executed the executed that the executed the executed the executed the executed that the executed the executed the executed the executed the executed that the executed the executed the executed the executed that the executed the executed the executed that the executed the executed the executed the executed the executed that the executed the executed the executed the executed that the executed that the executed the executed the executed the executed the executed that the executed the executed that the executed the execute										
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

obert E. Crawford 6-7-04 724-274-500