

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JAMES B. McARTHUR, Jr.
Secretary of State
1000 North Florida Avenue, Suite 100
Tallahassee, Florida 32301-2000

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS

95 MAY -1 PM 1:42

DOCUMENT # P94000034415 (7)

1. Corporation Name

CRANE CITY AMUSEMENTS INC.

Principal Place of Business

P O BOX 260998
TAMPA FL 33685-0998

Mailing Address

P O BOX 260998
TAMPA FL 33685-0998

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

05/04/1994

3a. Date of Last Report

N/A

4. FCI Number

59 325 0030

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.037,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite Apt # etc

2a. Mailing Address

26 Suite Apt # etc

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BORER, PETER F
101 E KENNEDY SUITE 3800
TAMPA FL 33602**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as set forth in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0105, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1	12.2	12.3	12.4
NAME	STREET ADDRESS	CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

13.1	13.2	13.3	13.4
NAME	STREET ADDRESS	CITY, ST, ZIP	
<i>Handwritten:</i> Marylyn A Borer	<i>Handwritten:</i> 4320 Satterwater Blvd	<i>Handwritten:</i> Tampa FL 33615	☐ Change ☐ Addition
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			☐ Change ☐ Addition
			☐ Change ☐ Addition
			☐ Change ☐ Addition
			☐ Change ☐ Addition

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.037(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That can be filed on or after the 1st day of the corporation or trust anniversary to maintain this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, together with an address.

SIGNATURE:

SIGNATURE AND TYPE ON PRINTED NAME OF BOILING OFFICER OR DIRECTOR

Handwritten: 4/23/95 813886 263