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Apr 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000089360 (8)

1. Corporation Name

AFFORDABLE CRANE SERVICE, INC.



Principal Place of Business
2695 PONCE DE LEON DRIVE
NAPLES FL 33942

Mailing Address
2695 PONCE DE LEON DRIVE
NAPLES FL 34105-2775

3. Date Incorporated or Qualified
11/20/1995

3a. Date of Last Report
03/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt # etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

65-0628184

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. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THEISS, NORMAN E
2695 PONCE DE LEON DRIVE
NAPLES FL 33942

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 607.0502 and 607.1508, Florida
Statutes, I, the undersigned, being a resident of this State, do hereby
certify that I am familiar with and accept the obligations of Section 607.1508,
Florida Statutes.

The above-named corporation submits this statement for the purpose of changing its registered
agent. I hereby accept the appointment as registered
agent.

SIGNATURE

Signature of registered agent or person authorized to act as registered agent

Signature of Registered Agent (signature required when reinstating)

DATE

3-24-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	THEISS, NORMAN E.	2695 PONCE DE LEON DRIVE	NAPLES FL
ST	THEISS, GERALDINE	2695 PONCE DE LEON DRIVE	NAPLES FL

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
			34105
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP
			34105
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption
information indicated on this annual report or supplemental annual report is true and accurate
I am an officer or director of the corporation or the receiver or trustee empowered to exercise
appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Section 119.07(3)(i), Florida Statutes. I further certify that the
my signature shall have the same legal effect as if made under oath; that
as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24

941-434-2252

CR2E034 (9/96)