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FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT #

1. Corporation Name

LA' CRANE, INC.

P96000099905

Principal Place of Business

Mailing Address

2423 S/E DIXIE HWY.
STUART, FL 34996

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/9/1996

4. FEI Number

65-0719270

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

9. Name and Address of Current Registered Agent

CRANE, LEE ANNE
2423 S/E DIXIE HWY.
STUART, FL 34996

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

10. Name and Address of New Registered Agent

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 (6)(b) and 607 15(8), Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 06(5), Florida Statutes.

SIGNATURE

Signature of the person who is the officer or director of the corporation

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PRTS	☐	DELETE
NAME	LEEANNE CRANE		
STREET ADDRESS	2423 S/E DIXIE HWY		
CITY- ST- ZIP	STUART, FL 34996		
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐	Change	☐	Addition
1.2 NAME				
1.3 STREET ADDRESS				
1.4 CITY- ST- ZIP				
2.1 TITLE	☐	Change	☐	Addition
2.2 NAME				
2.3 STREET ADDRESS				
2.4 CITY- ST- ZIP				
3.1 TITLE	☐	Change	☐	Addition
3.2 NAME				
3.3 STREET ADDRESS				
3.4 CITY- ST- ZIP				
4.1 TITLE	☐	Change	☐	Addition
4.2 NAME				
4.3 STREET ADDRESS				
4.4 CITY- ST- ZIP				
5.1 TITLE	☐	Change	☐	Addition
5.2 NAME				
5.3 STREET ADDRESS				
5.4 CITY- ST- ZIP				
6.1 TITLE	☐	Change	☐	Addition
6.2 NAME				
6.3 STREET ADDRESS				
6.4 CITY- ST- ZIP				

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***150.00

14. I hereby certify that the information supplied on this filing does not qualify for the exception stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as I made under oath, if I am an officer or director of the corporation. The person or persons employed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of changes on a filing with no updates.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lee Anne Crane

4/30/98 501-220-5908

CR2E034 (10/97)