

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2006 8:00 am
Secretary of State


05-11-2006 90244 040 ***150.00

DOCUMENT # P97000024237 1. Entity Name BROOKSVILLE CRANE SERVICE, INC.	
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Principal Place of Business 24478 DORSEY SMITH RD BROOKSVILLE, FL 34601	Mailing Address 24478 DORSEY SMITH RD BROOKSVILLE, FL 34601
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DO NOT WRITE IN THIS SPACE

66019459



04272006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3439511	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FIELDS, ARTHUR C 24478 DORSEY SMITH RD BROOKSVILLE, FL 34601	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FIELDS, ARTHUR C 24478 DORSEY SMITH RD BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD FIELDS, DONNA L 24478 DORSEY SMITH RD BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Donald F Hix, Jr <u>ADD</u> 3398 Horseshoe Lane Spring Hill, Fl 34606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 or trustee empowered to execute this report 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 like empowered.

SIGNATURE: Arthur C. Fields May 1, 2006 352-796-7323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

66019459

#P97000024237

Donald Hix
Vice President of
Operations.