FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

0168875

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90257 039 ***150.00
03-01-1999 90257 040 *****8.75

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000023377**

1. Corporation Name
HUNTER CRANE, INC.

Principal Place of Business	Mailing Address
2041 MAPLEWOOD DRIVE CORAL SPRINGS FL 33071	2041 MAPLEWOOD DRIVE CORAL SPRINGS FL 33071

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 03/12/1998

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

4. FEI Number: 65-0820684 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FROETSCHEL, LINDA A 2041 MAPLEWOOD DRIVE CORAL SPRINGS FL 33071	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, 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 607.0505, Florida Statutes.

SIGNATURE: Linda A Froetschel LINDA A. FROETSCHEL S/T/D JAN. 24th 1999
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	V/D	☒ Change ☐ Addition
NAME	FROETSCHEL, RONALD W		1.2 NAME	FROETSCHEL,RONALD W	
STREET ADDRESS	2041 MAPLEWOOD DRIVE		1.3 STREET ADDRESS	2041 MAPLEWOOD DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	D	☐ DELETE	2.1 TITLE	S/T/D	☒ Change ☐ Addition
NAME	FROETSCHEL, LINDA A		2.2 NAME	FROETSCHEL,LINDA A	
STREET ADDRESS	2041 MAPLEWOOD DRIVE		2.3 STREET ADDRESS	2041 MAPLEWOOD DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		2.4 CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		☐ DELETE	3.1 TITLE	P/D	☐ Change ☒ Addition
NAME			3.2 NAME	MATERDOMINI,JOSEPH G	
STREET ADDRESS			3.3 STREET ADDRESS	2037 MAPLEWOOD DRIVE	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		☐ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME			4.2 NAME	LOBATO,DOUGLAS L	
STREET ADDRESS			4.3 STREET ADDRESS	5470 NW 41st WAY	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE		☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME			5.2 NAME	SCESNY,ROBERT D	
STREET ADDRESS			5.3 STREET ADDRESS	1521 NW 62nd TERRACE	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	MARGATE,FL 33063	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Linda A Froetschel LINDA A. FROETSCHEL JAN. 24th 1999 (954)346-8739
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #