

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2000 8:00 am
Secretary of State
03-28-2000 90046 017 ***158.75

DOCUMENT # P99000007531

1. Entity Name

CRANE VENTURES, INC.

Principal Place of Business

**113 FOURTH STREET
FORT WALTON BEACH FL 32548**

Mailing Address

**113 FOURTH STREET
FORT WALTON BEACH FL 32548-5418**

2. Principal Place of Business

113 Fourth Street S.E.
Suite, Apt. #, etc.

3. Mailing Address

113 Fourth Street SE
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Fort Walton Beach, FL

City & State

Fort Walton Beach, FL

4. FEI Number

59-3558245

Applied For

Not Applicable

Zip

Country

Zip

Country

32548

32548

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEWART, KEITH ALAN
113 FOURTH STREET
FORT WALTON BEACH FL 32548**

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	DAMIANO, DOMINIC	
STREET ADDRESS	810 NORTH LAKESIDE DR.	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEWART, KEITH ALAN	
STREET ADDRESS	113 FOURTH ST. SE	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEWART, CHRISTINE F	
STREET ADDRESS	113 FOURTH ST SE	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Damiano, Dominic	
STREET ADDRESS	328 Bay Shore Dr.	
CITY-ST-ZIP	Destin FL 32541	
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stewart Keith Alan	
STREET ADDRESS	113 Fourth Street SE	
CITY-ST-ZIP	Fort Walton Beach, FL 32548	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with a power of attorney.

SIGNATURE:

Christine F. Stewart

Date

Daytime Phone #

3/24/00 850-243-3383

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)