## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 05, 2001 8:00 am Secretary of State DOCUMENT # P9900007531 1. Entity Name CRANE VENTURES, INC. 04-05-2001 90040 023 \*\*\*150.00 Principal Place of Business Mailing Address 748 OLD HIGHWAY 98 748 OLD HIGHWAY 98 DESTIN FL 32550 DESTIN FL 32550 Principal Place of Business Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Applied For 4. FEI Number ity & State . City & State 59-3558245 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DOMINIC DAMIANO STEWART, KEITH ALAN Street Address (P.O. Box Number is Not Acceptable) 113 FOURTH STREET FORT WALTON BEACH FL 32548 Zio Coos 3254 stered agent, or both, in the State of Florida. 8. The above named entity submits this statement for the purpose of changing its registered office or re SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent sig FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Change ☐ Delete TITLE NAME NAME DAMIANO, DOMINIC STREET ADDRESS STREET ADDRESS 328 BAYSHORE DR CITY-ST-ZIP CITY-ST-ZIP DESTIN FL 32541 Delete TITLE NAME STEWART, KEITH ALAN NAME STREET ADDRESS 113 4TH ST SE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT WALTON BEACH FL 32548 Change TITLE. TITLE: -Delete -- = NAME STEWART, CHRISTINE F NAME STREET ADORESS STREET ADDRESS 113 4TH ST SE CITY-ST-7IP CITY-ST-ZIP FORT WALTON BEACH FL 32548 32550 Addition Change ☐ Delete TITLE DOMINIC DAMIANO NAME NAME Bayshore Drive STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition ☐ Delete TITLE Change Director TITLE BARANOWSKI NAME NAME STREET ADDRESS STREET ADDRESS WINTERS CHAPPEL ROAD CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete DIRECTOR Change TITLE NAME NAME DAVIS STREET ADDRESS STREET ADDRESS 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 rental 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 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 an another states. With all other like empowered. CITY-ST-ZIP 13. I hereby certify that the information indicated on this report or suppler of the corporation or the receiver/

changed, or on an attachment

SIGNATURE: