

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **210914** (8)
1. Corporation Name
BAILEY MOTOR EQUIPMENT CO



Principal Place of Business Mailing Address
**805 W. CENTRAL BLVD.
P O BOX 3386
ORLANDO FL 32805
US**

3. Date Incorporated or Qualified **03/29/1958** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-0833954** Applied For Not Applicable
5. Certificate 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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

g. Name and Address of Current Registered Agent
**EASTERLING, PHIL A.
1328 OVERLAKE AVE.
ORLANDO FL 32806**

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 607.0502 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 _____ (NOTE: Registered Agent signature required for this filing) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	EASTERLING, PHIL A	
STREET ADDRESS	1328 OVERLAKE AVE	
CITY-ST-ZIP	ORLANDO, FL 00000	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	EASTERLING, JAMES S	
STREET ADDRESS	1409 LAKE MARION DR	
CITY-ST-ZIP	APOPKA FL	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	MILLER, MITCH A.	
1.3 STREET ADDRESS	1140 N. FAIRWAY Dr.	
1.4 CITY-ST-ZIP	Apopka, FL 32712	
2.1 TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	EASTERLING, MICHAEL A.	
2.3 STREET ADDRESS	3261 INVERNESS CT.	
2.4 CITY-ST-ZIP	ORLANDO, FL 32806	
3.1 TITLE	CEO-D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	EASTERLING, PHIL A.	
3.3 STREET ADDRESS	1328 OVERLAKE AVE.	
3.4 CITY-ST-ZIP	ORLANDO, FL 32806	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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-05/06/96-01008-004
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Michael A. Easterling* Michael A. EASTERLING 24-96 (407) 422-8134
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-Month-Year

CR2E034 (12/95)

CS 5-1-96