SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1997	DIVISIONO					
DOCUMENT # J88336 (9) COOKS POWER EQUIPMENT DISTRIBUTORS, INC.							
COOKS	POWER EQUIPMENT DIS	THIBUTORS, INC.					
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Principal Place of Business Mailing Address					. seeling and seed to see tilbe tilte bins along digit bins bibli bibli bibli bibli bibli bibli bibli		
395 ENTERPRISE STREET OCOEE FL 34761		395 ENTERPRISE STREET OCOEE FL 34761			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 3a. Date of Last Report 08/19/1987 03/05/1996		
	lace of Business	26. Mailing Address			4. FEI Number Applied Fo		
Suite, Apt.	# Alc	26 Suite, Apl. #, etc.			59-2852767 Not Applied S8.75 Additional		
22	π, φιο.	27			5. Certificate of Status Desired Fee Required		
City & Stat	θ .	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. Yes No		
	9, Name and Address of Curr	ent Hegistered Agent		81 Namo	10. Name and Address of New Registered Agent		
	SETT, LADD H.	^^	{	DI Hallio			
14 E. WASHINGTON ST., SUITE 500 ORLANDO FL 32801			[82 Street A	Address (P.O. Box Number is Not Acceptable)		
UNI	ANDO PL 32001		F	83			
			ļ				
				84 City	FL 85 Zip Code		
•	to the provisions of Sections 607.05 egistered agent, or both, in the Star im familiar with, and accept the obli	502 and 607.1508, Florida Statu te of Florida Such change was gations of, Section 607.0505, F	ites, the ab authorized lorida Statu	oove-named of d by the corputes.	corporation submits this statement for the purpose of changing its registe oration's board of directors. I hereby accept the appointment as registers		
SIGNATURE	Signature, typed or printed name of registered a	gent and trin if applicable (NO	Tt. Flegistered	Agent a gnature r	req. Fred when reinstaling) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD COOK KENNETH W	☐ DELFTE	1.1 7(1	[L Change L Add		
NAME	COOK, KENNETH W. 395 W. ENTERPRISE STREE	T	1.2 NA]			
STREET ADDRESS CITY-ST-ZIP	OCOEE FL	1	1	REET ADDRESS [IY-ST-ZIP			
TITLE	TD	☐ DELETE	2.1 747		Change Add		
NAME	COOK, MARY F.	_	2.2 NA	į			
STREET ADDRESS	395 W. ENTERPRISE STREE	T	2 3 ST	REET ADDRESS			
CITY-ST-ZIP	OCOEE FL		2. 4 CI	1Y-SI-ZIP			
TITLE	8	DELETE	3.1 Til	LE	Change Add		
NAME	COOK, LYDIA G.	_	3.2 NAI	ME			
STREET ADDRESS	395 W. ENTERPRISE STREE	Ţ		REET ADDRESS			
CITY-ST-ZIP	OCOEE FL	DELETE		TY-ST-ZIP	Change Add		
TITLE NAME		ביין אנונונ	4.1 TIT 4. 2 NA	4			
STREET ADDRESS			1	REFT ADDRESS			
CITY-ST-ZIP			1	Y-ST-ZIP			
TITLE		DELETE	5.1 TIT		Change Add		
NAME			5.2 NAI				
STREET ADDRESS			l	REET ADDRESS			
CITY-ST-ZIP			5. <u>4 C</u> /T	Y-S1-ZIP			
TITLE		DELETE	6.1 111	LE	Change Add		
NAME			6.2 NAI	ME			
STREET ADDRESS			6.3 STI	REFT ADDRESS			
CITY-S1-ZIP			6.4 CIT	Y-ST-ZIP			

do 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 by name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

MA ACTER AND MEDICARDED

FILED

Aug 29 1997 8:00am

Secretary of State