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

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

DELETE

DELETE

26

27

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FERNANDINA BCH FL 32035-1889

P O BOX 1889

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

FERNANDINA BEACH FL 32034

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

317 CENTRE ST

STE 250

US

22

TOLE

NAME

TITLE

NAME

STREET ADORESS

STREET ADORESS

SIGNATURE:

CHY-ST ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

3a. Date of Last Report

Change

Change

Addition

Addition

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

03/19/1996

П

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

04/01/1993

59-3173056

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000021859 (2)

YARNELL EQUIPMENT SALES, INC.

1014-B Beach St

_ Zip −	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032,	
4 32020	4 25 Nassan 25	_ 	30		Florida Statutes Yes No	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
YARNELL, J JAY			81	Name		
2119 ATLANTIC AVE FERNANDINA BEACH FL 32035				Street Add	ddress (P.O. Box Number is Not Acceptable)	
			83			
			84	,	PL 85 Zip Code poration submits this statement for the purpose of changing its register	
agent La GNATURE	militarnilian with, and accept the obligations	of, Section 607.0505. Flo	orida Statutes	š.	ition's board of directors. I hereby accept the appointment as registere	
<u>.</u>	OFFICERS AND DIR	ECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LĒ	P	DELETE	1.1 THTLE		☐ Change ☐ Add	
dE.	YARNELL, J JAY		1.2 NAME			
EET ADDRESS	2119 ATLANTIC AVE		1.3 STREET	ADDRESS		
Y - \$1 - ZIP	FERNANDINA BEACH FL		1.4 CITY-S	T - ZIP		
₹	S	☐ DELETE	2.1 TITLE		Change Ado	
1i	YARNELL, NANCY		2.2 NAME		;	
ET ADDRESS	2119 ARLANTIC AVE		23 STREET		New York Control of the Control of t	
/ \$1 - 7/P F	FERNANDINA BEACH FL	DELETE	2 4 DITY - 9 3.1 TITLE	ST-ZIP	Change Adv	
r 1Ē		Em perete	3.1 IIILE		E Charge Acc	
et Ladoress			3.2 NAME 3.3 STREET	ADDDECC		
re i Aughess r- St-Zip			3.4. CITY - 9			
F	······································	☐ DELETE	4.1 TITLE	51 · 4(F	☐ Change ☐ Ado	
1E		-	4. 2 NAME			
REET ADDRESS			4.3 STREET	ADDRESS		
IY-ST ZIF			4.4 CITY - S	T- 21P		

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. The report is true and accurate and 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 inclicated 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.

5.4 CITY - ST - ZIP

Country