

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 APR 19 AM 2:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # V48412 (3)**

1. Corporation Name  
**ISLAND RENT-ALL & SALES COMPANY**

Principal Place of Business Mailing Address  
**801 E. ELKCAM CR.  
MARCO ISLAND FL 33937  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **07/01/1992** 3a. Date of Last Report **01/25/1994**  
4. FEI Number **65-8354301** Applied For   
Not Applicable   
5. Certificate of Status Desired  **\$8.75 Additional  
Fee Required**  
6. Election Campaign Financing  **\$5.00 May Be  
Trust Fund Contribution Added to Fees**  
7. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 **800 E ELKCAM CIR** 26 **SAME**  
22 Suite, Apt. #, etc. **#3** 27 Suite, Apt. #, etc.  
23 **MARCO ISLAND FL** 28 City & State  
24 **33937** 25 **FLORIDA** 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**WILBERS, MICHELLE H.  
801 E. ELKCAM CIR.  
MARCO ISLAND FL 33937**

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 when reconstituting) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECKER, BRANT W.	1.2 NAME	
STREET ADDRESS	800 ARCADIA COURT	1.3 STREET ADDRESS	
CITY - ST - ZIP	MARCO ISLAND FL	1.4 CITY - ST - ZIP	
TITLE	DT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECKER, MARYANN	2.2 NAME	
STREET ADDRESS	800 ARCADIA COURT	2.3 STREET ADDRESS	
CITY - ST - ZIP	MARCO ISLAND FL	2.4 CITY - ST - ZIP	
TITLE	DV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECKER, BRANT J.	3.2 NAME	
STREET ADDRESS	281 2ND AVENUE, APT. B	3.3 STREET ADDRESS	
CITY - ST - ZIP	MARCO ISLAND FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and correct 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 accept the same; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an affidavit.

SIGNATURE: **BRANT W. BECKER** *[Signature]* **PRESIDENT** Date **1-27-95** **818-344-1082**