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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J95551

(4)

SUN RENTALS, INC.

Principal Place of Business				Mailing Address					
334 1ST STREET CALLAHAN FL 32011			GI	206 S ORANGE ST GREEN COVE SPRINGS FL 32043-4130 US					
									3. Date Incorporated or Qualified 3a. Date of Last Report 04/29/1996
2. Principal Place of Business				28. Mailing Address					4. FEI Number Applied For
21			26					v-ran,	59-2847990 Not Applicable
Suite, Apt. #, etc.			-	Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
22			27	City & State					Fee Required
City & State			20	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country			20	Zip Country					8. This corporation has liability for intangible tax under s. 199.032,
24			- ├──		30			Florida Statutes Yes No	
	9. Name a	nd Address of Curre	nt Regis	stered Agent					10. Name and Address of New Registered Agent
PEA	RSALL, WILL	JAM J.				8	11	Name	
208 S. ORANGE ST.							2	Street Ac	Address (P.O. Box Number is Not Acceptable)
& COVE SPRINGS FL 32043									
							33		
							4	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 60h, 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 accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Sidned to Wood or	printed name of represent abo	CV/C	C/AN/	FEAT (NOTE	Bugistorea A	Azier	nt signature ros	required when reinstating) DATE
12.		OFFICERS AN				13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPT			DE DE	LETE	1.1 1111	F		Change Addition
NAME A STATE PEARSALL, WILLIAM J.				1.2 N			lF.		
STREET ADDRESS 5349 JULINGTON RIDGE DR				1.3 S			E1 /	ADDRESS	
CITY-ST-ZIP ;	JACKSON\	ALLE FL			LETE	1.4 CITY		- 7IP	
TITLE	S CAPTUR AND MADE LAND			☐ DELETE			2.1 TITLE		Change Addition
NAME ADDRESS							2.2 NAME 2.3 STREET ADDRESS		·
	6 3 4 1 4 4 4 4 4 4 1 PM						2.3 STREET ADDRESS 2.4 C41Y+S1-ZIP		
CITY-ST-ZIP TITLE	CALLATIAN	I FL		DE DE	LETE	31 11111		1-711	Change Addition
NAME .				_		3.2 NAM	١[
STREET ADDRESS				3.3 STREET				ADDRESS	
CITY-ST-ZIP						3.4 CITY	<u> </u>	<u>T - ZIP</u>	
TITLE				DE	LETE	4.1 11111	F		Change Addition
NAME	,					4. 2 NAN	AF.	1	
STREET ADDRESS						i i		ADORESS	
CITY-ST-ZIP					1675	4.4 City		1-71P	
TITLE				L] D	LETE	5.1 TITUS			☐ Change ☐ Addition
NAME STREET ADDRESS						5.2 NAM		ADDRESS	
CITY-ST-ZIP						5.4 CITY			
TITLE	 			DE	LETE	6.1 TITE		(11	Change Addition
NAME						6.2 NAM			
STREET ADDRESS						Ł		ADDRESS	
CITY-ST-ZIP						6401Y			
14. To 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 receive of 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 open attachment with an address.									

SIGNATURE

Markall WILLIAM PENESAN

4-21-97

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FILED

Apr 25 1997 8:00am

Secretary of State