

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G75974

**Entity Name:** STERLING EQUIPMENT & MANUFACTURING CO. OF CENTRAL FLORIDA, INC.

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**8860188435CC**

**Current Principal Place of Business:**

803 LINE STREET  
UMATILLA, FL 32784-1449

**Current Mailing Address:**

803 LINE STREET  
UMATILLA, FL 32784-1449 US

**FEI Number: 59-2341269**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROGERS, PETER F  
803 LINE STREET  
UMATILLA, FL 32784 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name ROGERS, PETER F  
Address 803 LINE STREET  
City-State-Zip: UMATILLA FL 32784

Title STD  
Name ROGERS, SHARON L  
Address 803 LINE ST..  
City-State-Zip: UMATILLA FL 32784

Title VD  
Name ROGERS, WADE P  
Address 803 LINE ST  
City-State-Zip: UMATILLA FL 32784

Title AVD  
Name ROGERS, GREGG S  
Address 803 LINE ST  
City-State-Zip: UMATILLA FL 32784

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: WADE P. ROGERS**

**VD**

**01/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date