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PROFIT CORPORATION ANNUAL REPORT



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

1996

HIALEAH FL 33012

DOCUMENT # 150553

(6)

HIALEAH FL 33012

SHELLEY TRACTOR & EQUIPMENT CO.

| Principal Place of Business | Mailing Address | r 18616t 1168t Billt Stift Stift Gille frit anger giger giger gener gebre gebre gebre gebre gebre gebre gebre |
|-----------------------------|-----------------|---|
| P. O. BOX 2337              | P. O. BOX 2337  |   |

| Principal Pace of Business   2a Mailing Address   5. Principal Pace of Business   2a   |                               |   |                                      |   |              |                             | 3. Date Incorporated or Qualified  |  |
|--|-------------------------------|---|--------------------------------------|---|--------------|-----------------------------|--|--|
| Sulfa, Apt. #, etc.    | - 6: ( 15                     |   | Los Mailine Address                  |   |              |                             |  |  |
| Suite, Apt. #, etc.    | <u> </u>                      |   | 1                                    |   |              | 1.5                         |  |  |
| City & State   |                               | -1-   |                                      |   |              |                             | SR 75 Additional   |  |
| Trust Fund Contribution   Added to Fees   Zep    | 22 Suite, Apt. #              | etc.  | h <del>-</del>                       |   |              |                             |  |  |
| 29   | City & State                  |   | City & State                         |   |              |                             |  |  |
| 9, Name and Address of Current Registered Agent  9, Name and Address of Current Registered Agent  SHEPPARD, JAMES C. 8000 NW 109RD ST HIALEAH GARDENS FL 33012  10, Name and Address of New Registered Agent  11, Pursuant to the provisions of Sections 807.0502 and 807.1509, Fiorida Statutes, the above named corporation authors this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent, or both in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent, or both in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent, or both in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent, or both in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent, or both in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent, or both in the State of Porda. Such does not extend the purpose of changing its registered diffice or registered agent. I am of the purpose of changing its registered agent. I am of the purpose of changing its registered agent. I am of the purpose of changing its registered agent. I am of the purpose of changing its registered agent. I am of the purpose of changing its registered agent. I am of the purpose of changing its registered agent. I am of the purpose of changing its registered difference or registered agent. I am of the purpose of changing its registered difference or registered agent. I am of the purpose of changing its registered difference or registered agent. I am of the purpose of changing its registered difference or registered agent. I am of the purpose of changing its registered difference or registered agent. I am of the purpose of changing its registered difference or registered a | 23                            |   | 28                                   |   |              |                             | Trust Fund Contribution Added to Fees  |  |
| 9, Name and Address of Current Registered Agent  81 Name  10. Name and Address of New Registered Agent  82 Street Address (P.O. Box Number is Not Acceptable)  83 Fire Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zep Code  85 City  FL 85 Zep Code  86 City  FL 86 City  | Ζιρ                           | Country   | Zip                                  | Country   |              |                             |  |  |
| SHEPPARD, JAMES C. 8000 NW 103RD ST HIALEAH GARDENS FL 33012  82 Street Address (P.O. Box Number is Not Acceptable)  83   B4 City   FL   85   Zip Code    11. Prasent to the provisions of Sections 607 0502 and 607,1506, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered differ or registered agent or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered differ familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE   Signature, type or principle of any street agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am not a scoop the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE   Signature, type or principle in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am not a scoop the obligations of statutes.  SIGNATURE   Signature, type or principle in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered differ or principle. I am not a scoop the appointment as registered agent. I am not a scoop through the appointment as registered differ or principle agent. I am not a scoop through the appointment as registered differ in the State of Principle agent. I am not a scoop through the appointment as registered differ in the State of Principle agent. I am not a scoop through the appointment as registered differ in the State of Principle agent. I am not a scoop through the appointment as registered differ in the State of Principle agent. I am not a scoop through the appointment as registered differ in the State of Principle agent. I am not a scoop through the appointment as registered agent. I am not a scoop through the appointment as registered age |                               |   |                                      |   |              |                             |  |  |
| SHEPPARD, JAMES C.  8000 NW 103RD ST HIALEAH GARDENS FL 33012  81  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  City  FL 85  Zip Code  11. Pursuant to the provisions of Section's 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. Such others, were authorized by the corporation's board of directors. Thereby accept the appointment as registered diffice or registered agent, or both, in the State of Process State State or protect in the State of Process State State or protect in the State of Process State State or protect in the State of Process State State or protect in the State of Process State State or protect in the State of Process State State or Process AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. Intil  P/D  Herbert M. Humphrey  1. STREET ADDRESS  State State State or Process State State State or Process State S |                               | g. Name and Address of Current                      | Registered Agent                     |   | T            |                             | 10. Name and Address of New Hegistered Agent   |  |
| 8000 NW 103RD ST HIALEAH GARDENS FL 33012  81 64 City FL 85 Zp 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 fits registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered eigent. Lam  11. Pursuant to the provisions of Section 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. Thereby accept the appointment as registered office or registered agent, or both, and the state of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Statutes.  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  12. NAME  12. P/D  12. P/D  12. OFFICERS AND DIRECTORS IN 12  12. NAME  12. NAME  12. P/D  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  13. STREET ADDRESS  13. STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  14. City St. 2/P  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  14. City St. 2/P  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City St. 2/P  15. City St. 2/P  15. City St. 2/P  16. City St. 2/P  17. City St. 2/P  17. City St. 2/P  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Change  19. Change In the provisions of section of the city of the provisions of  |                               | <b>.</b> .  |                                      | 8   | B1           | Name                        |  |  |
| 8000 NW 103RD ST HIALEAH GARDENS FL 33012  81 64 City FL 85 Zp 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 fits registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered eigent. Lam  11. Pursuant to the provisions of Section 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. Thereby accept the appointment as registered office or registered agent, or both, and the state of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Statutes.  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  12. NAME  12. P/D  12. P/D  12. OFFICERS AND DIRECTORS IN 12  12. NAME  12. NAME  12. P/D  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  13. STREET ADDRESS  13. STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  14. City St. 2/P  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  14. City St. 2/P  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City St. 2/P  15. City St. 2/P  15. City St. 2/P  16. City St. 2/P  17. City St. 2/P  17. City St. 2/P  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Change  19. Change In the provisions of section of the city of the provisions of  | SHEPPARD, JAMEŚ C.            |   | ξ                                    | 82 Street Address (P.O. Box Number is Not Acceptable) |              |                             |  |  |
| HIALEAR GARDENS PL 33012    64   City  |                               |   |                                      | L   |              |                             |  |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am or registered agent agent and accept the obligations of. Section 607.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SID  OFFICERS AND DIRECTORS  12.   | HIALEA                        | H GARDENS FL 33012                                  |                                      | ٤   | B3           |                             |  |  |
| or registered agent, or both, in the State of Florida. Such crange was authorized by the components board of directors. Thereby accept the appointment as registered agent. Test familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10 SD  |                               |   |                                      | Ē   | B4           | City                        | FL 85 Zip Code   |  |
| Separative, byte or princed name of registerial agent and the finishication   NOTE, Registered Agent signature to registerial agent and the finishication   NOTE, Registered Agent signature to registerial agent and the finishication   NOTE, Registered Agent signature to registerial agent and the finishication   NOTE, Registered Agent signature to registerial agent and the finishication   NOTE, Registered Agent signature to registerial agent and the finishication   NOTE, Registered Agent signature to registerial agent so that the finishication   NOTE, Registered Agent signature to registered Agent signature to registered Agent signature to registered Agent signature to registered Addition   NOTE, Registered Agent signature to registered Agent signature to registered Addition   NOTE, Registered Agent signature to registered Agent signa   | or registere<br>familiar with | d agent, or both, in the State of Floric            | ia. Such change was authorize        | ea by the co  | e-na<br>orpo | amed corpo<br>oration's boa | oration submits this statement for the purpose of changing its registered office and of directors. I hereby accept the appointment as registered agent. I am |  |
| DELETE   1   TITLE   P/D   Change   Addition   | SIGNATURE _                   | ignature, typed or printed name of registered agent | and title if applicable (NO          | TE: Registered A                                      | gent         | signature requir            | red when reinstating) DATE   |  |
| NAME   FERRARO, JOS E   12 NAME   13 STREET ADDRESS   13 40 S. Perimeter Hwy   14 50 S. Perimeter Hwy   14 50 S. Perimeter Hwy   14 50 S. Perimeter Hwy   15 10 S. Perime   | 12.                           | OFFICERS AND  |                                      | 13.   |              |                             |  |  |
| SIREET ADDRESS   SALE   | TITLE                         | SD  | DELETE                               | 1. 1 TIT  | LΕ           |                             | P/D Change Addition  |  |
| SIRECT ADDRESS CHY-ST-ZIP COOPER CITY, FL 00000  TITLE VD SHEPPARD, JAMES C SIRECT ADDRESS CITY-ST-ZIP DAVIE, FL 00000  TITLE VD SHEPPARD, JAMES C SIRECT ADDRESS CITY-ST-ZIP DAVIE, FL 00000  TITLE VD SHEPPARD, JAMES C SIRECT ADDRESS CITY-ST-ZIP DAVIE, FL 00000  TITLE VP/D Tom Draper 10503 N.W. 5 Street Plantation, Fl. 33324  Change Addition  TOTOM Draper 10503 N.W. 5 Street Plantation, Fl. 33324  Change Addition  TOTOM Draper 10503 N.W. 5 Street Plantation, Fl. 33324  Change Addition  TITLE VP/D Tom Draper 10503 N.W. 5 Street Plantation, Fl. 33324  Change Addition  Addition  TITLE NAME MITCHELL, KARLSSON 32 STREET ADDRESS 6800 S W 112TH ST 33 STREET ADDRESS 6800 S W 112TH ST 33 STREET ADDRESS MILLS, EDITH F. STREET ADDRESS CITY-ST-ZIP DAVIE, FL 00000  TITLE DAVIE, FL 00000  TITLE DAVIE, FL 00000  TITLE DAVIE, FL 00000  TOTOM Draper 10503 N.W. 5 Street 10 | NAME                          | FERRARO, JOS E                                      | •                                    | 1.2 NAM   | ME           |                             |  |  |
| COOPER CITY, FL 00000  | STREET ADDRESS                | · · · · · · · · · · · · ·                           |                                      | 1.3 STR   | REET         | ADDRESS                     | 12/10 S Portmotor Buy  |  |
| NAME   |                               |   |                                      | 1.4 CITY  | Y-ST         | r-21P                       | Atlanta Ca 20210 -   |  |
| SHEPPARD, JAMES C  14350 SW 30 CT.  DAVIE, FL 00000  DAVIE, FL 00000  NAME  MITCHELL, KARLSSON SIREFI ADDRESS CHY-SI-ZIP  MIAMI, FL 00000  MILLS, EDITH F.  SIREFI ADDRESS CHY-SI-ZIP  NAME  MILLS, EDITH F.  SIREFI ADDRESS CHY-SI-ZIP  DAVIE, FL 00000  DELETE  Tom Draper 10503 N.W. 5 Street 10503 N.W. 5 Street Plantation, Fl. 33324  Plantation, Fl. 33324  Change Addition  Mitchell  Executive— V.P./D Change Addition  Karlsson Mitchell  6800 S.W. 112 Street Miami, Fl. 33156  Change Addition  MILLS, EDITH F.  SIREFI ADDRESS CHY-SI-ZIP  MILLS, EDITH F.  SIREFI ADDRESS CHY-SI-ZIP  DAVIE, FL 00000  DELETE  5 1 TITLE  NAME  SIREFI ADDRESS S 3 STREET ADDRESS  |                               |   | DELETE                               |   |              |                             |  |  |
| STREET ADDRESS   14350 SW 30 CT.   2.3 STREET ADDRESS   Plantation, Fl. 33324  | NAME                          |   |                                      | 2.2 NAM   | ME           |                             | Tom Draper   |  |
| TITLE PD   |                               |   |                                      | 2.3 STR   | REET         | ADDRESS                     | 10503 N.W. 5 Street  |  |
| TITLE NAME NAME NAME NAME NAME STREET ADDRESS CHY-SI-ZIP NAME NAME NAME NAME NAME NAME NAME STREET ADDRESS CHY-SI-ZIP NAME STREET ADDRESS CHY-SI-ZIP NAME NAME STREET ADDRESS CHY-SI-ZIP NAME NAME STREET ADDRESS CHY-SI-ZIP NAME STREET ADDRESS CHY-SI-ZIP NAME NAME STREET ADDRESS CHY-SI-ZIP NAME STREET ADDRESS CHY-SI-ZIP NAME STREET ADDRESS  | l E                           |   |                                      |   |              |                             | Plantation, Fl. 33324  |  |
| NAME STREET ADDRESS   |                               |   | DELETE                               |   |              | ·- <del></del>              | Executive V P /D Change Addition   |  |
| SIREET ADDRESS CHY-SI-ZIP MIAMI, FL 00000  TILE D NAME SIREET ADDRESS CHY-SI-ZIP MIAMI, FL 00000  MILLS, EDITH F. STREET ADDRESS CHY-SI-ZIP MILLS, EDITH F. STREET ADDRESS CHY-SI-ZIP DAVIE, FL 00000  DELETE  33. STREET ADDRESS A4. CHY-SI-ZIP A4. THILE T/D G-97 ge W. Gray 134 DS. Perlimeter Hwy A4. CHY-SI-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS   |                               |   |                                      | 3.2 NA  | MF           |                             |  |  |
| MAMI, FL 00000   34 CITY-SI-ZIP   Miami, Fl 33156   Change   Addition  |                               | •   |                                      |   |              | ADDRESS                     |  |  |
| TILE D POELETE 4 1 TITLE T/D GARDEN Addition  NAME MILLS, EDITH F.  SIREET ADDRESS 14214 S W 30 COURT  CITY-SI-ZIP DAVIE, FL 00000 44 CITY-SI-ZIP ATLANTA, Ga. 30349  TITLE  NAME  STREET ADDRESS 53 STREET ADDRESS  STREET ADDRESS 53 STREET ADDRESS  |                               | **** *  |                                      |   |              |                             |  |  |
| NAME STREET ADDRESS CITY-SI-ZIP NAME NAME STREET ADDRESS CITY-SI-ZIP NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS ACCITY-SI-ZIP NAME STREET ADDRESS STREET ADDRESS ACCITY-SI-ZIP Addition  GRAPT W. Gray STREET HWY ACCITY-SI-ZIP Addition STREET ADDRESS STREET ADDRESS  |                               |   | DELETE                               |   |              | 1-11                        | Ti Chango I I Addition   |  |
| STREET ADDRESS  14214 S W 30 COURT  DAVIE, FL 00000  DELETE  13968. Perimeter Hwy  44 CITY-ST-ZIP  Atlanta, Ga. 30349  Change Addition  52 NAME  STREET ADDRESS  S3 STREET ADDRESS  S3 STREET ADDRESS  | 1                             |   | P                                    |   |              |                             | ,  |  |
| CITY-SI-ZIP DAVIE, FL 00000 44 CITY-SI-ZIP Atlanta, Ga. 30349  TITLE  NAME  STREET ADDRESS  44 CITY-SI-ZIP Atlanta, Ga. 30349  Change Addition  Addition  52 NAME  53 STREET ADDRESS   |                               |   |                                      |   |              | ADDRESS                     | George W. Gray   |  |
| TITLE  NAME  STREET ADDRESS  5.3 STREET ADDRESS  5.3 STREET ADDRESS  |                               |   |                                      | l l   |              |                             | Atlanta Co 20210   |  |
| NAME STREET ADDRESS 5.2 NAME 5.3 STREET ADDRESS  |                               | DAVIE, FL 00000                                     | □ DELETE                             |   |              | 1-211                       | Change Addition  |  |
| STREET ADDRESS 5.3 STREET ADDRESS  |                               |   | [] been                              | 1   |              |                             |  |  |
| SHELL SOFTES   |                               |   |                                      |   |              | ADDDECC                     |  |  |
|  |                               |   |                                      |   |              |                             |  |  |
| Change C Addition  | CITY-ST-ZIP                   |   | ☐ DELETE                             |   | _            | 1-217                       | Chance C Addition  |  |
| The state of the s | l t                           |   |                                      |   |              |                             |  |  |
| NAME 62 NAME   | !                             |   |                                      |   |              |                             |  |  |
| STREET ADDRESS 63 STREET ADDRESS   | STREET ADDRESS                |   |                                      |   |              |                             |  |  |
| CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 1  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)(k), Florida Statutes. I further  | CITY - ST - ZIP               |   | with this films is an historial from | 64 CIT  | Y-5          | I-ZIP                       | for the exemption stated in Section 110 07/29/A Florida Statutes I further   |  |

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)(k), 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 my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 (305) 821-4040

CR2E034 (12/95)