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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #

261456

(8)

Corporation CON	rane Tractors equipment r	ENTAL COMPANY		J (BANKO) DIJE GHIRA IRAH BIRAH A	ANT ANN ARAN ARAN ANAN ANAN ANAN ARAN AR
Principal Place	of Business	Maling Address			
1331 WEST CENTRAL AVENUE ORLANDO FL 32805		P O BOX 3542 ORLANDO FL 32802-3542 US			
	····			3. Date Incorporated or Qualified 08/02/1962	3a. Date of Last Report 05/01/1995
	ace of Business	2a. Maling Address 26		4, FEI Number 59-0976339	Applied For
Suite, Apt	#. etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζφ 24	Country 25	Zip	Country	8. This corporation has liability for	
	9. Name and Address of Curre	29 29 Agent	30	Florida Statutes Yes 10. Name and Address of New F	⊠ No
			81 Name	IO. Name and Address of New P	legistered Agent
	TROY M JR		82 Street Add	Iress (P.O. Box Number is Not Acceptab	sla\
1331 WEST CENTRAL AVE			62 Street Add	rress (F.O. BOX Number is Not Acceptab	и о)
ORLAN	IDO FL 32805		83		
			84 City		85 Zip Code
11. Pursuant te	O the provisings of Sections 607 0500	cool 60 / 1509 Flor do Chit		ration submits this statement for the pur	
familiar with	h, and accept the obligations of, Sect	on 607 0505, Florida Statute		ration subfillis this statement for the pur ird of directors. Thereby accept the appo	pose of changing its registered office pintment as registered agent. I am
12.	Signative, typed or printed name of registere shaped		31. Registered Agent signature require		GATE
TITLE	OFFICERS AN	DIDINI GTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	
NAME	DEAL, TROY M JR	[] britis	1 1 TITLE 12 NAME		☐ Change ☐ Addition
STREET ADDRESS	1331 W. CENTRAL BLVD.		1.3 STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		14 CITY - ST - ZIP		
TITLE	STD	DELF FE	2 1 TITLE		☐ Change ☐ Addition
NAME	FOX, STEPHEN M.		2.2 NAME		C onlings C Addition
STREET ADDRESS	1331 W CENTRAL BLVD		2.3 STREET ADDRESS		
C(TY-ST-ZIP	ORLANDO, FL 00000		2.4 CITY ST-ZIP		
TITLE		DELETE	3 1 III LE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-ST-ZIP TITLE		FI price	3.4 C+TY - S1 - ZIP		
NAME		DELETE	4 THE		Change
STREET ADDRESS			4.2 NAME		
CITY - ST - ZIP			4.3 STREET ADDRESS	•	
TITLE		DELETE	5 3 TITLE		
NAME			5.2 NAME		Change
STREET ADDRESS			5.3 STREET ADDRESS	40000184	10784
CITY - ST - ZIP			5 4 CITY - ST - ZIP	40000184 -05/28/96010	32022
TITLE		DELETE	6 1 TILE	***1000.00	Criange Addition
NAME			62 NAME		<u> </u>
STREET AUDRESS			6.3 STREE: ADDRESS		\mathcal{H}_{-}
CITY-ST ZIP			64 CITY - ST - 7IP		1 32
14. FGO hereby.	certify that the information surplied a	ath this filence is eal intact of me	ichad and door not outlife for	as the englishment of the contract of the cont	27/0.01 5:

4. I do hereby certify that the information supplied with this fling 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:

STEPLE NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STEPHEN M. Fox

4/30/96

....(407)849-6420