

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 284770

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** J.B. EQUIPMENT SPECIALISTS, INC.

**Current Principal Place of Business:**

2727 WEST MAIN STREET  
LEESBURG, FL 347497667

**New Principal Place of Business:**

2727 WEST MAIN STREET  
LEESBURG, FL 34748 US

**Current Mailing Address:**

P O BOX 490667  
LEESBURG, FL 347490667 US

**New Mailing Address:**

**FEI Number:** 59-1060818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BJORN, JUDY  
5525 BANANA POINT DR  
OKAHUMPKA, FL 34762 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: BJORN, JUDY  
Address: 5525 BANANA POINT DR  
City-St-Zip: OKAHUMPKA, FL 34762

Title: D  
Name: BJORN, JUDY  
Address: 5525 BANANA POINT DR  
City-St-Zip: OKAHUMPKA, FL 34762

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: JUDY BJORN

PST

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date