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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(6)

FILED Apr 30 1998 8:00am Secretary of State

ROGE	R HOLLER RENTAL CO.					ÁIDH AIBH BIAN BIRN PAR
Principal Plac	ce of Business	Mailing Address				
SOO PARK AV		500 PARK AVE S.				
STE. 202 STE. 202						
WINTER PARK FL 32789		WINTER PARK FL 32789		DO NOT WRITE IN THIS :	SPACE	
U\$		US			3. Date Incorporated or Qualified	
O Delegate at 6	Diagnat Division	T			08/29/1968	
· '	Place of Business	2a. Mailing Address 26 PO BOX	1720		4. FEI Number	Applied For
Suite Apt # etc.		26 PO DOX Suite, Apt. #, etc.	1120		59-1269969	Not Applicable
22		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	de	City & State			6. Election Campaign Financing	
23		28 WINTER	PARK	1. 凡	Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the cur	
24	25	29 32740	30		_ · · · · · · · - ·	Yes No
	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered	Agent
PRICE, PAMELA O			81	Name	_	
, 201 E. PINE ST			82	82 Street Address (P.O. Box Number is Not Acceptable)		
STE.1200						
OR OR	RLANDO FL 32802		83			
١.			84	City		85 Zip Code
			·		FL	
11. Pursuant office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statut f Florida, Such change was:	es, the above	e-named corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing its registered
agent. I a	am familiar with, and accept the obligat	ions of, Section 607.0505, Fi	orida Statutes	i inc corporatii 3.	or a board or directors. Thereby accept the app	ointimont as registered
SIGNATURE						
	Signature, typed or printed name of registrated agent OFFICERS AND			ent signature require	ed when reinstating) DATE.	i
12.	PSD OF HOLERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
NAME	HOLLER JR,ROGER W	L otter	1.2 NAME			Cularitie C Monitori [
STREET ADDRESS	500 PARK AVE S., STE. 202		1.3 STREET	*DDDCCC		
CITY-ST-ZIP	WINTER PARK FL					
TITLE			1.4 City-S 2 title	1.21		Change Addition
NAME	HOLLER, ROGER W. I		22 NAME			C orango C rasmon
STREET ADDRESS	FOO DADY AVE O OTE OOD		2.3 STREET	AUDDLCC		
CITY-ST-ZIP	I S S A PROPERTY OF A PROPERTY		2.4 CITY-S			
TITLE	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		3.1 TITLE	51- ZIF		☐ Change ☐ Addition
NAME	HOLLER, JULIETTE E.					
STREET ADDRESS	FAC DARK ALF O ATT AND		3.3 STREET	ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		3.4. CITY - S			
TITLE	VD	DELETE 4.1 TI				☐ Change ☐ Addition
NAME	HOLLER, CHRISTOPHER A.		4. 2 NAME			
STREET ADDRESS	500 PARK AVE S. ,STE. 202	500 PARK AVE S. ,STE. 202		ADDRESS		
CITY-ST-ZIP	MANITED DADY CI		4.4 CITY - S	1 - ŽIP		
TITLE			5.1 TITLE		- · · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5.2 NAME		\ /	
STREET ADDRESS	5.3 SIF		5.3 STREET	ADDRESS	\	δ
CITY-ST-ZIP			5.4 CITY-S	T-ZiP	,,	
TITLE		DELET e	6.1 THTLE		00000250652	ange Addition
NAME			6.2 NAME	,	-04/30/980103600	14
STREET ADDRESS			6.3 STREET	address	***2700.00	
CITY-ST-ZIP			6.4 CITY - S	r- <i>Z</i> IP		

14. I 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 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.