

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 21 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 381401 (9)

1. Corporation Name

TOWNS END TRUCK AND EQUIPMENT SERVICE, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **05/03/1971** 3a. Date of Last Report **04/29/1994**

4. FEI Number **59-1349828** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

**2021 ORTIZ AVENUE
FT MYERS FL 33905**

Mailing Address

**2021 ORTIZ AVENUE
FT MYERS FL 33905**

21. Suite, Apt. #, etc.

21

2a. Mailing Address

26

22. City & State

22

27. Suite, Apt. #, etc.

27

23. City & State

23

28. City & State

28

24. Zip

24

Country

25

29. Zip

29

Country

30

9. Name and Address of Current Registered Agent

**TOWNSEND, ALDEN M
2336 CLUB HOUSE RD.
N FT MYERS FL 33917**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip 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 its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VD**
NAME **COOK, CYRUS B**
STREET ADDRESS **2336 CLUB HOUSE ROAD**
CITY - ST - ZIP **NO FT MYERS, FL 00000**

TITLE **PD**
NAME **TOWNSEND, ALDEN M**
STREET ADDRESS **2336 CLUB HOUSE RD.**
CITY - ST - ZIP **N FT MYERS FL**

TITLE **STD**
NAME **TOWNSEND, HELEN J.**
STREET ADDRESS **2336 CLUB HOUSE RD.**
CITY - ST - ZIP **NO FT MYERS, FL 00000**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE **VD** ☐ Change ☒ Addition
2. NAME **Colleen F. Terry**
3. STREET ADDRESS **6640 Golden Rd.**
4. CITY - ST - ZIP **North Fort Myers, FL. 33917**

2. TITLE ☒ Change ☐ Addition
2. NAME **Townsend, Alden M**
3. STREET ADDRESS **1759 St. Clair Ave E**
4. CITY - ST - ZIP **North Fort Myers, FL. 33903**

3. TITLE ☒ Change ☐ Addition
3. NAME **Townsend, Helen J.**
3. STREET ADDRESS **1759 St. Clair Ave E**
4. CITY - ST - ZIP **North Fort Myers, FL. 33903**

4. TITLE ☒ Change ☐ Addition
4. NAME **REMOVE FROM LIST**
4. STREET ADDRESS **Cook, Cyrus B.**
4. CITY - ST - ZIP **2336 Club House Rd.**

5. TITLE ☐ Change ☐ Addition
5. NAME **North Fort Myers, FL**

6. TITLE ☐ Change ☐ Addition
6. NAME
6. STREET ADDRESS
6. CITY - ST - ZIP

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)(b), 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: *Alden M Townsend* Alden Townsend

3/13/95

332-7188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number