

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 464696 (4)

1. Corporation Name

SOWELL TRACTOR COMPANY, INC.



Principal Place of Business

2841 HIGHWAY 77 NORTH
P. O. BOX 744
PANAMA CITY FLORIDA 32405-4409

Mailing Address

2841 HIGHWAY 77 NORTH
P. O. BOX 744
PANAMA CITY FLORIDA 32405-4409

2. Principal Place of Business

21 2841 HWY. 77 N

22 Suite, Apt. #, etc.

23 City & State

23 PANAMA CITY FLA.

24 32404

25 USA

2a. Mailing Address

26 PO Box 391

27 Suite, Apt. #, etc.

28 City & State

28 PANAMA CITY FLA.

29 32402

30 USA

3. Date Incorporated or Qualified

11/06/1974

3a. Date of Last Report

03/14/1995

4. FEI Number

59-1551844

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. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SOWELL, ROBERT
1122 LOFTIN ST.
PANAMA CITY FLORIDA 32401

10. Name and Address of New Registered Agent

81 Name ELEANOR W. SOWELL
82 Street Address (P.O. Box Number is Not Acceptable) 2841 HWY. 77 NORTH
83 PANAMA CITY FL. 32405
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 ELEANOR W. SOWELL

Eleanor W. Sowell

1/23/96

Signature of Registered Agent (Signature required for change of registered agent)

Signature of Registered Agent (Signature required for change of registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☒ DELETE
NAME	SOWELL, ROBERT	
STREET ADDRESS	1122 LOFTIN ST	
CITY-STATE-ZIP	PANAMA CITY FL	
TITLE	VSD	☒ DELETE
NAME	SOWELL, ELEANOR	
STREET ADDRESS	1122 LOFTIN ST.	
CITY-STATE-ZIP	PANAMA CITY FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PRESIDENT	☒ Change ☐ Addition
2. NAME	ELEANOR W. SOWELL	
3. STREET ADDRESS	2841 HWY. 77 NORTH	
4. CITY-STATE-ZIP	PANAMA CITY, FLA. 32405	☐ Change ☒ Addition
5. TITLE	VICE PRESIDENT	☐ Change ☒ Addition
6. NAME	ROBERT C. SOWELL	
7. STREET ADDRESS	2600 FIRST PLAZA	
8. CITY-STATE-ZIP	PANAMA CITY FL. 32404	☐ Change ☒ Addition
9. TITLE	SECRETARY	☐ Change ☒ Addition
10. NAME	ROXANE L. SOWELL	
11. STREET ADDRESS	1906 D HARRISON AVENUE	
12. CITY-STATE-ZIP	PANAMA CITY FL. 32405	☐ Change ☒ Addition
13. TITLE	TREASURER	☐ Change ☒ Addition
14. NAME	ROBIN L. SOWELL	
15. STREET ADDRESS	1305 RALPH AVENUE	
16. CITY-STATE-ZIP	PANAMA CITY FL. 32404	☐ Change ☐ Addition
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-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)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental and/or 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 or person 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. ROBERT L. SOWELL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 23, 1996 904 263-5444

CR2E034 (12/95)