

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

FLORIDA DEPARTMENT OF STATE
TAX AND RECORDS DIVISION

SERIALIZED NO. 13

DOCUMENT # **515162**

(6)

1. Corporation Name

AGRI-MACHINERY, INC.

Principal Place of Business

**3489 ALL AMERICAN BLVD.
ORLANDO FL 32810**

Mailing Address

**3489 ALL AMERICAN BLVD.
ORLANDO FL 32810**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Street, Apt. #, etc.

26. Mailing Address

26

Street, Apt. #, etc.

3. Date Incorporated or Organized **09/22/1976** 39. Date of Last Report **02/04/1994**

4. I.D. Number **59-1693049** Applied For Not Applicable

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

6. Election Campaign Financing **\$5.00** May Be Added to Fees
Individual Contribution

7. This corporation has liability for intangible tax under § 1930.02.
Florida Statutes Yes No

City & State

29

City & State

29

Zip

24

9. Name and Address of Current Registered Agent

**TURNER, JOSEPH R
3489 ALL AMERICAN BLVD.
ORLANDO, FL
32810**

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 Section 117.002 and 1107.1508, Florida Statutes, the above named corporation submits the 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 understand, the provisions of Chapter 1107, Florida Statutes.

SIGNATURE: *Joseph R. Turner*

Joe R. Turner

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

001 **ST**
NAME **TURNER, JOSEPH R**
STREET ADDRESS **3489 ALL AMERICAN BLVD.**
CITY & ZIP **ORLANDO, FL 00000**

11.001 Change Addition
12 NAME
13 STREET ADDRESS
14 CITY & ZIP

002 **PD**
NAME **WHITWORTH, ALBERT P**
STREET ADDRESS **605 WEBSTER AVE**
CITY & ZIP **ALTAMONTE SPRGS, FL00000**

21.001 Change Addition
22 NAME
23 STREET ADDRESS
24 CITY & ZIP

003

31.001 Change Addition
32 NAME
33 STREET ADDRESS
34 CITY & ZIP

004

41.001 Change Addition
42 NAME
43 STREET ADDRESS
44 CITY & ZIP

005

51.001 Change Addition
52 NAME
53 STREET ADDRESS
54 CITY & ZIP

006

61.001 Change Addition
62 NAME
63 STREET ADDRESS
64 CITY & ZIP

007

71.001 Change Addition
72 NAME
73 STREET ADDRESS
74 CITY & ZIP

008

81.001 Change Addition
82 NAME
83 STREET ADDRESS
84 CITY & 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 1100.07(6)(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 hereafter made under oath that I am an officer or director of the corporation or the receiver or trustee empowered to negotiate a report as required by Chapter 1107, Florida Statutes, and that my name appears in block 12 or block 13 if changed, or on an alternate board with an alias.

SIGNATURE: *JOSEPH R TURNER*

2/6/95 (407) 299-1592

Signature