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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # 575230**

(8)

D & D RENTALS, INC. Principal Place of Business Mailing Address 709 W GAINES ST P.O. BOX 2478 TALLAHASSEE FL 32304 TALLAHASSEE FL 32316-2476 3. Date Incorporated or Qualified 3a. Date of Last Report 06/09/1978 04/15/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-1829351 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 28 Trust Fund Contribution Added to Fees 23 Country Country Ζiρ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name LAMB, MARION D. JR. 1972 RAYMOND DIEHL RD 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32308 83 City 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 it am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE try lature, typica or printed name of registered agent and har if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ___ Addition 1.1 TITLE Tillif NAME DOWDEN, HARRY 12 NAME **804 SANTA ROSA** 1.3 STREET ADDRESS 3227 Tanager Trail STREET ADDRESS TALLAHASSEE FL 32301 1.4 CiTY-ST-ZiP <u> Tallahassee, FL 32303</u> Cilir-ST Change Addition DELETE 2.1 TITLE TRUE NAME DOWDEN, RICHARD 2.2 NAME RT 7 BOX 1065-D 2.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 2. 4 CITY - ST - ZIP City-St DELETE Change Addition TITLE 3.1 TITLE NAME **BRODEUR, ELYSE** 3.2 NAME 6644 Landover Circle STREET ADDRESS 1857 HOPKINS DR 3.3 STREET ADDRESS Tallahassee, FL 32311 **TALLAHASSEE FL 32303** 3.4. CITY-ST-ZIP CHTY+ST ZIP Change DELETE 4 1 TITLE ☐ Addition THEF 4 2 NAME NVE 4.3 STREET ADDRESS STREET ACORESS 4.4 CITY-ST-ZIP CITY-S1-ZP DELETE Change Addition THE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP City-St-ZiP DELETE 6.1 TITLE Change Addition HILE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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.

FILED

Apr 11 1997 8:00am

Secretary of State

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