FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAR -3 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 607430 (6)

1. Corporation Name

JANSEN TRUCK & EQUIPMENT, INC.

Principal Place of Business	Mailing Address
P. O. BOX 490096ET LEESBURG FL 34749-0096	PO BOX 490096 LEESBURG FL 34749-0096 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/04/1979
3a. Date of Last Report: 03/21/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 59-1882410 ☐ 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

DAVIS, RANTSON E.
1321 W CITIZENS BOULEVARD, SUITE F
P O DRAWER 1319
LEESBURG FL 34749

10. Name and Address of New Registered Agent

81 Name: Marilyn L. Jansen
82 Street Address (P.O. Box Number is Not Acceptable): 723 E. Main St.
83
84 City: Leesburg FL 85 Zip Code: 34748

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: Marilyn L. Jansen — Marilyn L. Jansen, Pres. — 2/27/95
(Signature, title(s) or partial name of new registered agent required if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VPD	1.1 TITLE		☐ Change ☒ Addition
NAME	JANSEN, THEODORE S.	1.2 NAME		
STREET ADDRESS	1507 W. LANCASTER AVE.	1.3 STREET ADDRESS		
CITY-ST-ZIP	LEESBURG FL	1.4 CITY-ST-ZIP	zip 34748	
TITLE	PD	2.1 TITLE		☐ Change ☒ Addition
NAME	JANSEN, MARILYN L.	2.2 NAME		
STREET ADDRESS	1507 W. LANCASTER AVE.	2.3 STREET ADDRESS		
CITY-ST-ZIP	LEESBURG FL	2.4 CITY-ST-ZIP	zip 34748	
TITLE	STD	3.1 TITLE		☐ Change ☒ Addition
NAME	JANSEN, KURT T.	3.2 NAME		
STREET ADDRESS	221 W 17TH ST.	3.3 STREET ADDRESS		
CITY-ST-ZIP	SANFORD FL	3.4 CITY-ST-ZIP	zip 32771	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 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)(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.

SIGNATURE: Marilyn L. Jansen — Marilyn L. Jansen, Pres. — (904)787-2265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)

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