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 APR 28 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 677614 (0)

1. Corporation Name
SUN BELT EQUIPMENT SALES, INC.

Principal Place of Business	Mailing Address
5018 24TH AVENUE SOUTH P.O. BOX 75307 TAMPA FL 33675	5018 24TH AVENUE SOUTH P.O. BOX 75307 TAMPA FL 33675

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/27/1980
3a. Date of Last Report: 04/22/1994

2. Principal Place of Business
21: 5018 24th Avenue, So.
22: Suite, Apt. #, etc:
23: City & State: Tampa, Florida
24: Zip: 33619
25: County: U S A

2a. Mailing Address
26: P. O. Box 75307
27: Suite, Apt. #, etc.:
28: City & State: Tampa, Florida
29: Zip: 33675
30: Country: U S A

4. FEI Number: 59-2009906 ☐ 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

TRONU, DONNA G.
% SUN BELT EQUIPMENT SALES INC
5018 24TH AVE. S.
TAMPA FL 33619

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, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	P; D	☐ Change ☒ Addition
NAME	TRONU, ROBERT A, JR	12 NAME		
STREET ADDRESS	2902 SPANIEL LANE	13 STREET ADDRESS		
CITY ST ZIP	SEFFNER FL	14 CITY ST ZIP	Seffner, Florida 33584	
TITLE	ST	21 TITLE	S; T; D	☐ Change ☒ Addition
NAME	TRONU, DONNA G	22 NAME		
STREET ADDRESS	2902 SPANIEL LANE	23 STREET ADDRESS		
CITY ST ZIP	SEFFNER FL	24 CITY ST ZIP	Seffner, Florida 33584	
TITLE	VP	31 TITLE	VP; D	☐ Change ☒ Addition
NAME	MATTHEWS III, JOSEPH E.	32 NAME		
STREET ADDRESS	8421 ORIENT WAY N.E.	33 STREET ADDRESS		
CITY ST ZIP	ST. PETERSBURG FL	34 CITY ST ZIP	St. Petersburg, Florida 33702	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 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: ✓ Donna G. Tronu Sec/Treas 4/24/95 (813) 247-1220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Donna G. Tronu, Secretary and Treasurer

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