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Secretary of State

06-08-1999 90005 048 ***550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 677614

1. Corporation Name

SUN BELT EQUIPMENT SALES, INC.

Principal Place of Business

**5018 24TH AVENUE, SO
TAMPA FL 33619
US**

Mailing Address

**P. O. BOX 75307
TAMPA FL 33675
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/27/1980

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

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 **ROBERT A. TRONU, JR**
82 Street Address (P.O. Box Number is Not Acceptable)
5018 24TH AVE S.
83
84 City **TAMPA** FL 85 Zip Code **33619**

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

ROBERT A. TRONU, JR VP + GENERAL MGR 05/01/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PD	ROLLER, THOMAS B	5018 24TH AVENUE, S	TAMPA FL 33619	
V	TRONU, ROBERT A JR.	5018 24TH AVENUE, S	TAMPA FL 33619	
VTSD	GARNER, C. KENT	5018 24TH AVENUE, S	TAMPA FL 33619	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1	1.2	1.3	1.4	
2.1	2.2	2.3	2.4	
3.1	3.2	3.3	3.4	
4.1	4.2	4.3	4.4	
5.1	5.2	5.3	5.4	
6.1	6.2	6.3	6.4	

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: **X**

ROBERT A. TRONU, JR

05/01/99

813-247-1220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0403108