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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 691375

(0)

FILED
May 13 1997 8:00am
Secretary of State

SAULS POWER EQUIPMENT, INC. Principal Place of Business Mailing Address LOYD & SAULS 1125 NORTH JEFFERSON STREET MONTICELLO FL 32344 MONTICELLO FL 32344										
						3. Date Incorporated or Qualified		te of Last R	eport	
		······································				06/22/1981 05/01/199				
2. Principal F	Nace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For	_	
21		26				59-2107236			t Applicable	_
Suite Apt	# etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75		1
22		[27]					Fee Re	- 	-	
City & Stat	ie	City & State				6. Election Campaign Financing	_	\$5.00		-
23	<u> </u>	28	Zip Country			Trust Fund Contribution		Added t		-
Zip IIII	Country	<u>-</u>		unity		8. This corporation has tiability for			. 199.032,	1
24	9. Name and Address of Current	[29] Registered Agent				Florida Statutes 10. Name and Address of New Re	Yes _			4
		Trogistores Agent		81 N	lame	IV. Harte and Address Of from the	gietoreu z	- Garir		┥
	ULS, LOYD S						·			_}
	5 NORTH JEFFERSON STREET			82 S	treet Addre	ess (P.O. Box Number is Not Acceptat	ole)			
MO	NTICELLO FL 32344			83						-
										}
				84 C	City		FL	85 Zip (Code	7
41 Durauant	to the prevenienc of September 607 0602	and 607 1508 Florida Statut	oc the o	bove-o	amed corp	oration submits this statement for the r		changing it	e registered	┥
office or	to the provisions of Sections 607.0502 registered agent, or both, in the State o am familiar with, and accept the obligat	of Florida, Such change was	authorize	ed by th	e corporati	ion's board of directors. I hereby accept	pt the app	changing it	registered	}
agent. La	am familiar with, and accept the obligat	tions of, Section 607.0505, Fi	orida Sta	itutes.						1
SIGNATURE	Sequence typed or printed name or registered agen	and the Bench white	F. Basistan	nd Appel of	long to the	ed when reinstating)	DATE			Į
12.	OFFICERS AND		13.		Bustora redoue	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	RS IN 12	ചിത
11TLF	CD	DELETE	1.1 T					Change	Addition	CR2E034 (9/96)
NAME	SAULS, LOYD S		1.2 N	1.2 NAME				-		4
STREET ADDRESS	1125 NO JEFFERSON ST 72		1.3 \$1		DRESS					18
CITY - ST-ZIP	MONTICELLO, FL 00000		140		1					띯
THE	† · · · · · · <u> · · · · · · · · · · · </u>			2.1 TITLE				Change	Addition	ქხ
NAME	SAULS, CAROLYN W	•		2.2 NAME						1
STREET ADDRESS	1125 NO JEFFERSON ST 72			2.3 STREET ADDRESS						ł
CITY-ST-ZIP	MONTICELLO, FL 00000		2. 4 CITY - S1 - ZIF		i					1
1416	VP DELETE			3.1 TITLE			·····	Change	AUgitton	+
NAME			1	32 NAME						
STREET ADDRESS	RT 2 BOX 15502		1	STREET ADI	DRESS					
CHY-\$1-7/P	MONTICELLO FL			CITY-ST-Z	- 1					1
TILLE	VP	DELETE	4.1.1				. ,	Change	Addition	┪
NAM(SAULS, JR., LOYD S.		- 8	NAME						1
STREET ADDRESS	1125 N. JEFFERSON ST.			TREET ADO	ADEGG					Į
CHY-SI-ZIP	MONTICELLO FL			CITY-ST-ZI						
HILE	MONTROCLEO I C	DELETE	51 I		"			Change	Addition	7
NAMI			5.2 N							
STREET ADDRESS				street adi	JBC66	•				
C-TY - ST - ZiP	1			SIMEET AUL	1					
11111		DELETE	6.1 T		<u></u>			Change	Addition	4
NAME	1	- Profit	6.2 N					W. 194	100·(/011	
					onrec					
STREET ADDRESS	1			STREET ADD						
14 Ldo bare	by certify that the information supplied	with this bling does not quali		OTY-ST-Z		in Section 119 07(3)(i) Florida Statuto	e I further	certify that	the	4
information	on indicated on this annual report or su	applemental annual report is t	rue and	accurat	e and that	my signature shall have the same legs	al effect as	if made un	der oath: tha	al .

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). 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:

CARRYN SOULS GERELLIN SAUL

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