## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 825963

(2)

## **GENERAL EQUIPMENT MANUFACTURERS**

Principal Place of Business Mailing Address					TERRET TEING TIRBUT TOTAL BUILD TOTAL BUILD TOTAL BUILD TOTAL BUILD TOTAL BUILD TOTAL BUILD BUIL						
102 KIRK STREET CRYSTAL SPRINGS MS 39059		CF	P.O. BOX 836 CRYSTAL SPRINGS MS 39059-0838 US				·				
							<ol> <li>Date Incorporated or Qualified 03/26/1971</li> </ol>	1	of Last Re \$/1996	eport	
2. Principa Pi	ace of Business	2a.	Mailing Address				4. FEI Number		Ap	plied For	
21		26					64-0366456	<del></del>	<del></del>	t Applicable	
Suite Apt.	# etc	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State	0		City & State			Ì	6. Election Campaign Financing	<b></b>	\$5.00		
23		28					Trust Fund Contribution	Ц	Added t		
Zφ	Country		Zip	Countr	У	-	8. This corporation has fiability for	intangible ta Yes		199.032,	
24	9. Name and Address of Current	29 Regie	tered Agent	0			Florida Statutes  D. Name and Address of New Re				
OID!	RIEN, TIM	110912	tored Agont	81	Name		0. 1141.10 4114 71411035 01 11011 114	Branchag wil	OII.		
	S. NORTH LAKE BLVD.				<u> </u>		***************************************				
STE. 1048			82 Street A			Address	ddress (P.O. Box Number is Not Acceptable)				
ALTAMONTE SPRINGS FL 32701			83								
				84	City			FL	85 Zip (	Code	
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 6 of Floridations of	07 1508, Florida Statutes, da Such change was aut f. Section 607 0505, Florid	, the about thorized b	re-named by the corp	corpora poration	tion submits this statement for the ps board of directors. I hereby acce	ourpose of co pt the appoi	hanging it ntment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered age:						hen reinstaling)	DATE			
12.	OFFICERS AND			13.	Jenic Signature	a tadellar w	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12	
TITLE	CD		DELETE	1 1 TITLE		Vic	e-President		Change	Addition	
NAME	PEETS, RANDOLPH D JR.			1.2 NAME		1	es D. Mulhall				
STREET ADDRESS	2207 GREENBRIAR			1 3 STREE	T ADDRESS	1	West Main Stree	t.			
CHY-ST-ZIP	JACKSON MS 39211			1.4 C/TY-	ST-ZIP		thtown, NY 117				
TITLE	DP		☐ DELETE	21 TITLE	· · · · · · · · · · · · · · · · · · ·		retary		Change	Addition	
NAME	SMITH, VICTOR			22 NAME			ienne W. Brantl	ev			
STREET ADDRESS	3 Cranebrake Dr.			23 STREE	t address		Canterbury Pla				
CITY - ST - ZIP	CRYSTAL SPRINGS MS 39059			2. 4 CITY	-ST-ZIP	Rid	geland, MS 391	57			
TITLE	DT		DELETE	3 1 TITLE					Change	Addition	
NAME	SORGENFREI, MARK A			3.2 NAME		]				Ì	
STREET ADDRESS	1517 KRISTEN DR.			3.3 STREE	T ADDRESS						
CITY - ST - ZIP	JACKSON MS 39211			3.4 CITY	· ST · ZIP	<u> </u>					
TITLE	DVP		DELETE	4.1 TITLE				Ľ	Change	Addition	
NAME	ERRINGTON, WILTON (BO)			4. 2 NAM		l					
STREET ADDRESS	2165 GATESVILLE RD.			4.3 STREE	T ADDRESS						
CITY - ST - ZIP	CRYSTAL SPRINGS MS 39059			4.4 CITY		<u> </u>					
TITLE	DVP		DELETE	5.1 TITLE				Ĺ	Change	Addition	
NAME	WOOD, CLAUDE S III		•	5.2 NAME							
STREET ADDRESS	1028 BEALL RD.			5.3 STREI	T ADDRESS						
CITY-ST-7IP	HAZLEHURST MS 39083			5.4 CITY	ST-ZIP	ļ	· · · · · · · · · · · · · · · · · · ·		_		
TITLE	DVP		DELETE	6 1 TITLE				Ĺ	Change	Addition	
NAME	Fitzgerald, Bryan a			62 NAME							

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.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

4657 OLD LAKE RD.

JACKSON MS 39212

**FILED** 

Jan 22 1997 8:00am

Secretary of State