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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 841228

FONTAINE TRUCK EQUIPMENT COMPANY

Country

25

2490 PINSON VALLEY PKWY. P.O. BOX 10887 BIRMINGHAM AL 35202

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

2490 PINSON VALLEY PKWY. P.O. BOX 10887 BIRMINGHAM AL 35202

**FILED** 

Jun 07, 1999 8:00 am Secretary of State

06-07-1999 90018 018 \*\*\*550.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

Personal Property Tax.

08/09/1978 4. FEI Number

63-0750784

9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent		
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			81	Name				
			82	Street	Address (P.O. Box Number is Not Acceptable)			
			83					
						las!	Zin Co	do.
			84	City	FI	_  85  -	Zip Co	de
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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE								
12.	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12
TITLE	D	G DELETE	1.1 TITLE			☐ Cha	nge	Addition
NAME	PRITZKER, ROBERT A		1.2 NAME					
STREET ADDRESS	225 W WASHINGTON ST	1.3 8		ADDRESS				]
CITY-ST-ZIP	CHICAGO IL	12		T-ZIP				
TITLE	P	C. DELETE	2.1 TITLE			Cha	nge	Addition
NAME	PUCKETT, JOHN K. JR.,		2.2 NAME					
STREET ADDRESS	2490 PINSON VALLEY PKWY BIRMINGHAM AL		2.3 STREET	ADDRESS				
CITY-ST-ZIP			2.4 CITY-S	2. 4 CITY-ST-ZIP				
TITLE	VD	DELETE	3.1 TITLE		Chairman ,	Cha	nge	Addition
NAME	GLUTH, ROBERT C		3.2 NAME		Anthony Pritator			
STREET ADORESS	225 W WASHINGTON ST		3.3 STREET	ADDRESS	11111 Santa monica Rluco			
CITY-ST-ZIP	CHICAGO IL			T-ZIP	Las Angoles Ca 90403			
TITLE	T	DELETE	4.1 TITLE			☐ Cha	nge	☐ Addition
NAME	GLUTH, ROBERT		4.2 NAME					ĺ
STREET ADDRESS	225 W WASHINGTON ST		4.3 STREET	ADDRESS				
CITY-ST-ZIP	CHICAGO IL		4.4 CITY-S	T-ZIP				
TITLE	\$	DELETE	5.1 TITLE		Secretary	Cha	nge	Addition
NAME	WEBB, ROBERT		52 NAME		Hound hillsker			
STREET ADDRESS	225 W WASHINGTON ST	Addition of		ADDRESS	200 w. madeenst			ĺ
CITY-ST-ZIP	CHICAGO IL		5.4 CITY-S	T- ZIP	Charage IL 60606			
TITLE	AS	☐ DELETE	6.1 TITLE			Cha	nge	Addition
NAME .	MOORE, J H		6.2 NAME					
STREET ADDRESS	2490 PINSON VALLEY KWY			T ADDRESS				ļ
CITY-ST-ZIP	BIRMINGHAM AL 35217		6.4 CITY-S		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		than to f	
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Country

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In nereby 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:

GNA DIFF AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/26/27 Date 2828 138202

CR2E034 (11/98)

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

No

Not Applicable