

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 854220 (1)
1. Corporation Name
INSTITUTIONAL EQUIPMENT CORPORATION

Principal Place of Business Mailing Address
2700 4TH AVE., SOUTH 2700 4TH AVE., SOUTH
BIRMINGHAM AL 35233 BIRMINGHAM AL 35233

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/29/1982 3a. Date of Last Report 04/28/1994
4. FEI Number 63-0400127 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. The corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 the 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 of Agent or registered agent or both, if applicable)

(Signature of Registered Agent (Signature required after 1/1/95))

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME PRITCHARD, DONALD R
1.3 STREET ADDRESS 2700 4TH AVE., SOUTH
1.4 CITY, ST, ZIP BIRMINGHAM AL
2.1 TITLE S
2.2 NAME SKLUTE, MAXINE KLINE
2.3 STREET ADDRESS 2700 4TH AVE. SOUTH
2.4 CITY, ST, ZIP BIRMINGHAM AL
3.1 TITLE V
3.2 NAME FRANKS, DAVID
3.3 STREET ADDRESS 2700 4TH AVE., SOUTH
3.4 CITY, ST, ZIP BIRMINGHAM AL
4.1 TITLE D
4.2 NAME PRITCHARD, DONALD R JR
4.3 STREET ADDRESS 2700 4TH AVE., SOUTH
4.4 CITY, ST, ZIP BIRMINGHAM AL
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Division 199.032, Florida Statutes. I further certify that the information was stated on this annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the law firm of a person empowered to complete this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 attached, or on an attachment with an address.

SIGNATURE:

Maxine Kline Sklute
SIGNATURE AND TYPED OR PRINTED NAME OF DOING OFFICER OR DIRECTOR
Maxine Kline Sklute, Corporate Secretary

4/28/95 (205) 324-5641