

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F00443

(4)

1. Corporation Name

SIMS CRANE & EQUIPMENT CO.

Principal Place of Business

Mailing Address

1219 N HWY 301
P O BOX 11825
TAMPA FL 33619
US

1219 N HWY 301
P O BOX 11825
TAMPA FL 33680

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/01/1980

4. FEI Number

59-2635880

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ 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

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

M. VERNON MOORE
1219 N HWY 301
TAMPA FL 33619

10. Name and Address of New Registered Agent

81 Name J. Steve Stodghill

82 Street Address (P.O. Box Number is Not Acceptable)
1219 N. HWY 301

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

Signature typed or printed name of registered agent and of officer if applicable

(NOTE - Registered Agent signature required when reinstating)

J. STEVE STODGHILL VP 4/29/98

12. OFFICERS AND DIRECTORS

TITLE P
NAME WILLIS, DALE J.
STREET ADDRESS 1110 ESTATE WOODS DR
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE D
NAME SIMS, DEAN P.
STREET ADDRESS 1219 N HWY 301
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE D
NAME SIMS, T.H., II
STREET ADDRESS 1219 N HWY 301
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE S
NAME WILLIS, MARY E.
STREET ADDRESS 1110 ESTATEWOOD DR.
CITY-ST-ZIP BRANDON FL

☐ DELETE

TITLE VT
NAME MOORE, M VERNON
STREET ADDRESS 7814 RIVER RIDGE DR
CITY-ST-ZIP TEMPLE TERRACE FL

☒ DELETE

TITLE VD
NAME STODGHILL, STEVE
STREET ADDRESS 9803 WOODHAND RIDGE
CITY-ST-ZIP TAMPA FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 2801 SPANIEL LANE
1.4 CITY-ST-ZIP SEFFNER

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 2801 SPANIEL LANE
4.4 CITY-ST-ZIP SEFFNER

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS 6406 112TH AVE
6.4 CITY-ST-ZIP Temple Terrace FL

☒ Change ☐ Addition

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.

SIGNATURE

J. Steve Stodghill 4/29/98

8125136-8102

CR2E034 (10/97)