2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Mar 08, 2005 08:00 AM Secretary of State DOCUMENT # F02000000725 1. Entity Name MAINLINE TRACTOR & EQUIPMENT CO INC Mailing Address Principal Place of Business 3333 26TH AVENUE EAST BRADENTON FL 34208 3333 26TH AVENUE EAST BRADENTON FL 34208 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE Applied For City & State City & State 4. FEI Number 03-0217456 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name COBB, CARL Street Address (P.O. Box Number is Not Acceptable) 3333 26TH AVENUE EAST **BRADENTON FL 34208** Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 1 am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2005 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition TITLE TITLE Delete NAME COBB. CARL NAME 3333 26TH AVENUE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34208** Change Addition Delete TITLE TITLE COBB, NANCY NAME NAME STREET ADDRESS STREET ADDRESS 3333 26TH AVENUE EAST CITY-ST-ZIP BRADENTON FL 34208 CITY-ST-ZIP ☐ Change Addition ☐ Delete RITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIÉ CHY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY, ST. 71P CHY-ST-7/P 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Davime Phone #