

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 28, 2007 08:00 AM
Secretary of State

DOCUMENT # F07000000003

1. Entity Name
TRAMMELL EQUIPMENT COMPANY, INC.



Principal Place of Business
**4270 1ST AVE SOUTH
BIRMINGHAM, AL 35232**

Mailing Address
**4270 1ST AVE SOUTH
BIRMINGHAM, AL 35232**



06132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-8934333	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	TRAMMELL, BUD
STREET ADDRESS	4270 1ST AVE SOUTH
CITY-STATE-ZIP	BIRMINGHAM, AL 35232

TITLE	DT
NAME	LINDSEY, STEPHEN
STREET ADDRESS	4270 1ST AVE SOUTH
CITY-STATE-ZIP	BIRMINGHAM, AL 35232

TITLE	CFO
NAME	LINDSEY, STEPHEN
STREET ADDRESS	4270 1ST AVE SOUTH
CITY-STATE-ZIP	BIRMINGHAM, AL 35232

TITLE	DS
NAME	NELSON, JAMES R
STREET ADDRESS	4270 1ST AVE SOUTH
CITY-STATE-ZIP	BIRMINGHAM, AL 35232

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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06/28/07-80002-007 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: *Burton M. Trammell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-25-07 (205) 591-6302
Date Daytime Phone #