

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90095 034 \*\*\*150.00

**DOCUMENT # F15699**

1. Entity Name

CREEL EQUIPMENT COMPANY, INC.



Principal Place of Business

4360 MILLWOOD LANE  
STE 3  
TALLAHASSEE FL 32312  
US

Mailing Address

4360 MILLWOOD LANE  
STE 3  
TALLAHASSEE FL 32312  
US



2. Principal Place of Business

4360 MILLWOOD LANE

Suite, Apt. #, etc.

3. Mailing Address

4360 MILLWOOD LANE

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

TALLAHASSEE, FL.

Zip  
32312

Country  
LEON

City & State

TALLAHASSEE, FL.

Zip  
32312

Country  
LEON

4. FEI Number

59-2060559

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CREEL, GLEN R SR  
4360 MILLWOOD LANE  
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00.**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE V ☐ Delete  
NAME CREEL, GLEN R. JR.  
STREET ADDRESS 4360 MILLWOOD LANE  
CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE ST ☐ Delete  
NAME CREEL, CAROLYN W.  
STREET ADDRESS 4360 MILLWOOD LANE  
CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE P ☐ Delete  
NAME CREEL, JOHN A  
STREET ADDRESS 269 WINDCHASE DR.  
CITY-ST-ZIP BIRMINGHAM AL 35242

TITLE V ☐ Delete  
NAME CREEL, GLEN R. S  
STREET ADDRESS 4360 MILLWOOD LANE  
CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Glen R. Creel Sr.* GLEN R. CREEL SR. VICE PRES. 1/24/06 850-510-6095