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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Sccretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # F86817

(6)

ROYCE BACKHOE SERVICE, INC.

**FILED** Apr 11 1997 8:00am Secretary of State



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Principal Place of Business Mailing Address						-	4 1244124 (101 12112 41101 (2010) (121) (4		14411 A1411 A14	11 6:6:1 166:
% DALE E. RO 2010 MILLS RI JACKSONVILLE	).	% DALE E. ROYCE 2010 MILLS RD. LACKSCANNILLE EL 222								
MONSOMVILLE	TL 42210	MONOCHVILLE IL 922				3. Date Incorporated or Qualified				
2. Principal Ela	ice of Business	2a. Mailing Address				4.	FEI Number			oplied For
21		26					<u>59-2197491</u>		No.	ot Applicable
Suite, Apt. #	, etc	Suite Apt. #, etc.		_		5.	Certificate of Status Desired			Additional equired
City & State 23		City & State .				- 1	Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z(p)	Country	Zφ	Cou	ntry		8.	This corporation has liability for		ax under s	. 199.032,
24	25	29	30						] No	
	9. Name and Address of Current	t Registered Agent				10.	Name and Address of New Re	gistered A	gent	
	CE, DALE E			81	Name					
	) MILLS RD KSONVILLE FL 32216			82	Street Addr	lress (P	O. Box Number is Not Acceptal	ole)	· <del>····································</del>	
0.10				83						
				84	City			FL	<b>85</b> Zip	Code
SIGNATURE	o the provisions of Sections 607,050; gistered agent, or both, in the State of lamifar with, and accept the obligation, the design of the obligation, the design of the printed base of registered age.  OFFICERS AND	orard tile il application (N			the corporat	ired when		DATE		
	OFFICE HS AND	DELETE	1.1 10				ADDITIONS/CHANGES TO OFFI	LIIO AND	Change	Addition
Title NAME	ROYCE, BARBARA E		1.1 N						Change	L. Addition
STREET ADDRESS	2010 MILLS RD		l l		ADDRESS					
O1Y-\$1.72	JACKSONVILLE, FL 00000		1.4 CI		- 1					ĺ
TIELF	DP	DELETE	2.1 Til		9-20				Change	Addition
NAM	ROYCE, DALE E		2.2 N	ME					-	
STREET ADDRESS	2010 MILLS RD		2 3 ST	REET	ADDRESS					
CH14 - S1 - Z40	JACKSONVILLE, FL 00000		2 4 C	[Y-8	ST-ZIP					
TIFLE		DELETE	3 1 TI	LE					Change	Addition
NAME			3.2 N	ME.						
STREET ADDRESS			3.3 ST	REET	ADDRESS					
C (Y-5) 74		22.72		******	ST-21P					
TIFLE		☐ DEL€TE	4.1 10						L Change	L. Addition
NAME SIN I CALL TO LOCAL			4. 2 N		1000000					
STREET ADDRESS		•			ADDRESS					
GHY 51-7 P 1-101		DELETE	5.1 TI		1 - ZIP			·	Change	Addition
NAME		بالماداد ب	5.2 N/					'	C.101.B4	
STREET ADORESS					ADDRESS					
CITY-ST-ZP			5.4 Cf							
Tiftif		DELETE	61 10	*****					Change	Addition
NAME			62 N	AME						ļ
STREET ADDRESS			6351	REET	ADDRESS					
CITY ST-7#			64 CI	<u> 17 - S</u>	T-ZIP					
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I do hereby certify that the information supplied with this fit no 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.

4-8-97 964-724-0115