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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93310 (3)

GULF COAST TRUCK & EQUIPMENT CO.

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FILED

Jan 27 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address			- E COMPLEM THE RELEASING WHEN THE CONTROL WHEN THE PROPERTY FOR THE PROPE				
,							
PINE FOREST RD AT I 10 PINE FOREST RD AT I 10 PO BOX 12345 PO BOX 12345							
PENSACOLA FL 32581 PENSACOLA FL 32581				DO NOT WRITE IN THIS	SPACE	-	
		1 21101100211 12 02001			3. Date Incorporated or Qualified		
					08/04/1982		
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number	Ar	piled For
21		26			59-2222094	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & State		City & State		,	6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the c	urrent year Int	angible
24	25	1	30		Personal Property Tax due June 30.		No.
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
	ESHIRE, O.W.			81 Name	oy W. Young		-
138	66 A SHORELINE DR		ŀ	82 Street Addr	ess (P.O. Box Number is Not Acceptable)		
PC	BOX 700			- Olivour, radar	bee (170) box (tallibor is flot / loospiable)		
GU	LF BREEZE FL 32561			83 0	THE DAY TO STATE	- 0.	1
					714 PINE FOREST	77 <i>0/4</i>	<u>a</u>
			- 1	84 City P	FNSACOLA FI		Code 5344
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the at	ove-named corp	oration submits this statement for the purpose	of changing it	s registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	f Florida. Such change was au ions of Section 607,0505. Flori	ithorized Ida Stati	i by the corporati	ion's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE	أصبرا أخرر ويدور فيست	VOUNG	1010 0100			_	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if application. (NOTE:	Registered	Agent signature require	ed when reinstating) DATE	6-98	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN		S IN 12
TITLE	VD	☐ DELETE	1.1 131	LE		Change	Addition
NAME	YOUNG, ROGER H.		1.2 NA	ME]:
STREET ADDRESS	41 EASTERN HILLS		1,3 \$11	REET ADDRESS			1;
CITY-ST-ZIP	COTTONDALE AL		1.4 CIT	Y-ST-ZIP			
TITLE	ASV	X DELETE	2,1 TIT	LE		L Change	Addition
NAME	CHESHIRE, O W		2.2 NA	ME			
STREET ADDRESS	1386 A SHORELINE DR		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	GULF BREEZE, FL 00000		2 4 0	TY-ST-ZIP			
TITLE	PD	DELETE	3.1 TIT		• • • •	☐ Change	Addition
NAME	YOUNG, FOY W		3.2 NA				
STREET ADDRESS	8714 PINE FOREST RD			REET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL			TY-ST-ZIP			
TITLE	SD	☐ DELETE	4.1 TIT		10.100	Change	Addition
NAME	YOUNG, PAULINE E		4. 2 NA	t t			
STREET ADDRESS	8714 PINE FOREST RD			REET ADDRESS	•		
CITY-ST-ZIP	PENSACOLA FL			Y-ST-21P			
TITLE		DELETE	5.1 TIT		· · ·	Change	Addition
NAME			5.2 NA				_ "
STREET ADDRESS				REET ADDRESS			Ì
CITY-ST-ZIP				Y-ST-ZIP			
TITLE			6.1 TIT			Change	Addition
NAME			6.2 NA	1			
				[
STREET ADDRESS			•	EET AODRESS			
CITY-ST-ZIP			■ 6.4 CIT	Y-ST-ZIP			

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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: