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Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000005286 (8)

1. Corporation Name

SNAPPER POWER EQUIPMENT, INC.

Principal Place of Business

535 MACON RD.
MCDONOUGH GA 30253

Mailing Address

535 MACON RD.
MCDONOUGH GA 30253



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

10/30/1995

4. FEI Number

58-1473288

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D KESSEL, SILVA
STREET ADDRESS
215 E 57TH ST
CITY- ST- ZIP
NEW YORK NY

TITLE ☐ DELETE

NAME
D KLUGE, JOHN W
STREET ADDRESS
215 E 67TH ST
CITY- ST- ZIP
NEW YORK NY

TITLE ☐ DELETE

NAME
D SUBOTNICK, STUART
STREET ADDRESS
215 E 67TH ST
CITY- ST- ZIP
NEW YORK NY

TITLE ☐ DELETE

NAME
D WADLER, ARNOLD
STREET ADDRESS
ONE MEADOWLAND PLAZA
CITY- ST- ZIP
EAST RUTHERFORD NJ

TITLE ☐ DELETE

NAME
V KINGHT, ROBIN C
STREET ADDRESS
535 MACON RD
CITY- ST- ZIP
MCDONOUGH GA

TITLE ☐ DELETE

NAME
V KIEL, PAUL
STREET ADDRESS
535 MACON RD
CITY- ST- ZIP
MCDONOUGH GA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

P

Chamberlain, Robin G.

V/S

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or otherwise 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:

Paul Kiel

3/10/98

770 954-2626

CR2E034 (10/97)