FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F97979** **(1)**

1. Entity Name

SWEARINGEN-LORD EQUIPMENT COMPANY, INC.

Principal Place of Business

2948 HWY 71
P.O. BOX 1525
MARIANNA FL 32446

Mailing Address

SWEARINGEN-LORD EQUIP CO
P.O. BOX 1525
MARIANNA FL 32447
US

2. Principal Place of Business
21
Street Address
22
City
23
County
24

2a. Mailing Address
26
State, Address, etc.
27
City, State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: **09/02/1982**

3a. Date of Last Report: **04/07/1995**

4. FEI Number: **59-2216389**

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. The corporation has liability for unemployment tax under s. 443.036, Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SWEARINGEN, GLENDA F.
4431 LAFAYETTE STREET
MARIANNA FL 32446

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 s. 607.1005, 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. The street address of the registered office and the name and address of the registered agent are typed or printed below. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

12. OFFICER/DIRECTOR(S)

PD ☐ Delete
SWEARINGEN, J.D., JR.
4231 SOUTH STREET
MARIANNA FL

VD ☐ Delete
LORD, JAMES D.
2762 SOUTH RIDGE LANE
MARIANNA FL

STD ☐ Delete
LORD, BRENDA J.
2762 SOUTH RIDGE LANE
MARIANNA FL

D ☐ Delete
SWEARINGEN, J.D., SR.
4317 SOUTH STREET
MARIANNA FL

D ☐ Delete
SWEARINGEN, RENA
4317 SOUTH STREET
MARIANNA FL

☐ Delete

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 Title ☐ Change ☐ Addition
1 Name
1 Street Address
1 City, State, Zip

2 Title ☐ Change ☐ Addition
2 Name
2 Street Address
2 City, State, Zip

3 Title ☐ Change ☐ Addition
3 Name
3 Street Address
3 City, State, Zip

4 Title ☐ Change ☐ Addition
4 Name
4 Street Address
4 City, State, Zip

5 Title ☐ Change ☐ Addition
5 Name
5 Street Address
5 City, State, Zip

6 Title ☐ Change ☐ Addition
6 Name
6 Street Address
6 City, State, Zip

CR2E034 (12/95)

14. To the best of my knowledge and belief, this Annual Report, including any accompanying statements, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. I am a director or officer of the corporation or the agent of the corporation upon whom process may be served. I further certify that the corporation has paid all fees due to the Department of State that are identified for purposes of this report, and that my name appears above, or on an attachment with all other like empowered. I understand that the annual report must be received by the Department of State by May 1 of the year following the calendar year for which the report is required. Pursuant to Chapter 607, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: J. D. Swearingen Jr. 1/23/96 904-526-2185

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number