**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (9) THOMAS EQUIPMENT SALES, INC. Principal Place of Business Mailing Address JAMES P. THOMAS. SR. % JAMES P. THOMAS, SR. 2744 RIVER OAK DRIVE 2744 RIVER OAK DRIVE DO NOT WRITE IN THIS SPACE **ORANGE PARK FL 32073 ORANGE PARK FL 32073** 3. Date Incorporated or Qualified 01/13/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2361730 Not Applicable 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28  $Z_{1D}$ Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THOMAS, JAMES P., SR. 2744 RIVER OAK DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE PARK FL 32073** 83 City 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 Signatine, lyped or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE Change TITLE 1 1 1/116 NAME THOMAS, JAMES P., SR. 1.2 NAME CR2E034 2744 RIVER OAK DRIVE STREET ADDRESS 1.3 STREET ADDRESS ORANGE PARK FL 32073 CUY-SI-ZIP 1.4 City-St-7iP DELETE Channe noitibhA TITLE 2.1 TITLE THOMAS, JAMES P JR NAME 22 NAME RT 2. BOX 525 PARDUE DR STREET ADDRESS 2.3 STREET ADDRESS SELMA AL 36701 CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 IDLE THOMAS, ELIZABETH B NAME 3.2 NAME 2744 RIVER OAK DR STREET ADDRESS 3.3 STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TOTLE 4 1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5 1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

54 CITY-ST-ZIP

6.3 STREET ADDRESS 64 CITY-ST-ZIP

Change

the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

Addition

61 TRLE

6.2 NAME

MESP. THOMAS 3/23/98 904264-7000 SIGNATURE:

14. I hereby certify that the information surplied with this filing does not qualifundicated on this annual report or surpliemental annual report is true and officer or director of the corporation or the receiver or trustee inpopers to Block 12 or Block 13 if changed, if on an altachment with a address.

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME