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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H47626 1. Corporation Name

NEELCO EQUIPMENT COUNTRY, INC.

Principal Place of Business	

Mailing Address

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90032 044 ***150.00



				1		
LVD .	400 BARTON BLVD.					
L 32955	ROCKLEDGE FL 32955					
				L	HIS SPACE	
				,		
lace of Business	2a. Mailing Address					pplied For
2 S. PISICEBLUD	26 SAWLE			59-2530142	l N	lot Applicable
#, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired	¥	Additional
) [27			g. Contracto of Claude Cooling	Fee F	Required
	City & State			6. Election Campaign Financing		May Be
ICLEDGE PC	28			Trust Fund Contribution	Added	to Fees
Country	Zip	Country		8. This corporation owes the current year		_ \
(ワワ 25 USA	29	30		Personal Property Tax.		□No
9. Name and Address of Current	Registered Agent			10. Name and Address of New Registe	red Agent	
		81	Name			
		82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	_	102	Olieet Ad	diess (1.0. Box Hamber is Het Hooopiasis)		
02 S. FISKE B	WD # 101	83				
KLEDGE FL 32955					[n=] 7:-	- C- 1-
		84	City		FL 85 ZIP	Code
to the provisions of Sections 607 0502	and 607 1508. Florida Statute	s the above	e-named co	progration submits this statement for the purpos	e of changing it	ts registered
egister thag it, poul, in the state o	f Horida, Such change was au	thorized by	the corpora	ation's board of directors. I hereby accept the a	ppointment as r	registered
	ds of, Section 607.0505, Flori	da Statutes	. Q.	non Anacon ca i	lislan	J
/// / / / No	NOTE:	Desired Anna	O	DECI CHREEDI SK.	11-21-14	
			ii signature requ		S AND DIRECT	ORS IN 12
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CHAFFIOT, ROBERT R.		1.2 NAME	TARRES			
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1802 S.FISKE BLVD.,#101 ROCKLEDGE FL PD CHAFFIOT, VICTOR A.	☐ DELETE	1.3 STREE* 1.4 CITY-S 2.1 TITLE 2.2 NAME	T-ZIP		☐ Change	Addition
1802 S.FISKE BLVD.,#101 ROCKLEDGE FL PD CHAFFIOT, VICTOR A. 400 BARTON BLVD.	☐ DELETE	1.3 STREE* 1.4 CITY-S 2.1 TITLE 2.2 NAME			☐ Change	Addition
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14. I hereby certify that the information supplied with this filing does and 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 trule 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 corporation or the corporation or the corporation of the

SIGNATURE

KUBERT CHAPPIOT SR