## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H48761

**Current Principal Place of Business:** 

Entity Name: TEAM EQUIPMENT, INC.

FILED Jan 15, 2009 Secretary of State

TEAM EQUIPMENT, INC. 6620 ORCHID LAKE ROAD NEW PORT RICHEY, FL 34653 US	
Current Mailing Address:	New Mailing Address:
TEAM EQUIPMENT, INC. 6620 ORCHID LAKE ROAD NEW PORT RICHEY, FL 34653 US	TEAM EQUIPMENT, INC. 6620 ORCHID LAKE ROAD NEW PORT RICHEY, FL 34653 US
FEI Number: 59-2527359 FEI Number Applied For ( ) FEI N	umber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
GERAS, JOHN 5334 HALTATA NEW PORT RICHEY, FL 34655 US	GERAS, JOHN PRES 5334 HALTATA NEW PORT RICHEY, FL 34655 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

Title:

**New Principal Place of Business:** 

Election Campaign Financing Trust Fund Contribution ( ).

() Delete

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

PD

SIGNATURE: JOHN GERAS

in the State of Florida.

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

01/15/2009

Date

GERAS, JOHN, Name: Name: 5334 HALTATA Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 US City-St-Zip: ( ) Delete Title: DS Title: () Change () Addition GERAS, JOYCE L., Name: Name: Address: 5334 HALTATA Address: NEW PORT RICHEY, FL 34655 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: REDDY, PATRICIA J VICE PR Name: 4546 FT. SHAW DR. Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN GERAS PRES 01/15/2009