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

**PROFIT** 

Mar 19 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # H98336 (1)D AND N RENTALS, INC. Principal Place of Business Mailing Address 2900 7TH AVENUE, NORTH 2900 7TH AVENUE, NORTH ST. PETERSBURG FL 33713 ST. PETERSBURG FL \$3713-6716 3. Date Incorporated or Qualified 3a. Date of Last Report 02/06/1986 03/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2669132 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State **\$5.00** May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country 210 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes X No 24 Florida Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name SLICKER, WILLAIM D 447 3RD AVENUE NORTH Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 405 83 ST. PETERSBURG FL 33703 84 City Zip Code 85 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, typicd or printed name of registered agent and title if appoinable DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE Change TITLE 1.1 TITLE NAME HEBERT, RICHARD F. 1.2 NAMI STREET ADDRESS 2900-7TH AVE..N. 1.3 STREET ADDRESS ST.PETERSBURG FL CITY-ST-ZIP 1.4 CHY - \$1 - ZIP DELETE Change Addition TITLE 2.1 THE WELCH, NORMA H. NAME 2.2 NAM! 2900 7TH AVENUE, NORTH STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 2. 4 CHY- \$1-7ff DELFTE Change Addition TITLE 3 1 HILLE NAME 3.2 NAME STREET ADDRESS 3.3 STHEET ADDRESS CITY-ST-ZIP 3.4 CHY- \$1-7IP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$T - ZIP DELFTE Change Addition TITLE 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP DELETL Addition TITLE 6.1 TITLE Change NAME 6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes Truthe information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect at a man officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter A07, Florida Statutes; a appears in Block 12 or Block 13 if changed, or on an attachment with an address. M further certify that the effect as if made under oath; that

**FILED**