

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 # L67149 (9)

1. Corporation Name

LEON'S LOADER SERVICE, INCORPORATED



Principal Place of Business

1555 VEREDA VERDE
SARASOTA FL 34232
US

Mailing Address

1555 VEREDA VERDE
2014 FOURTH STREET
SARASOTA FL 34232
US

3. Date Incorporated or Qualified

04/03/1990

3a. Date of Last Report

01/27/1995

2. Principal Place of Business

2a. Mailing Address

21 1213 Stoeber Ave

26 PO Box 10458

4. FEI Number

65-0171136

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

23 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24 Zip

25 Country

28 Zip

29 Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

24 34232

25 Sarasota

28 34278

29 Sarasota

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEE, H. GREG
2014 FOURTH ST.
SARASOTA FL 34237

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 of President, Secretary, Treasurer, or Registered Agent

Signature of Registered Agent (Signature required when not a shareholder)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE PD
2. NAME BEILER, LEON
3. STREET ADDRESS 1555 VEREDA VERDE
4. CITY-STATE-ZIP SARASOTA FL
5. TITLE DST
6. NAME BEILER, BRENDA J.
7. STREET ADDRESS 1555 VEREDA VERDE
8. CITY-STATE-ZIP SARASOTA FL
9. TITLE V
10. NAME SCHNERING, ERIC C
11. STREET ADDRESS 6316 BIKINI RD
12. CITY-STATE-ZIP SARASOTA FL
13. TITLE V
14. NAME BEILER, PAUL B
15. STREET ADDRESS 1213 STOEBER AVE
16. CITY-STATE-ZIP SARASOTA FL
17. TITLE
18. NAME
19. STREET ADDRESS
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99. STREET ADDRESS
100. CITY-STATE-ZIP

1. TITLE P/D
2. NAME Beiler, Leon
3. STREET ADDRESS 1213 Stoeber Ave.
4. CITY-STATE-ZIP Sarasota FL 34232
5. TITLE D/T
6. NAME Beiler, Brenda J.
7. STREET ADDRESS 1213 Stoeber Ave
8. CITY-STATE-ZIP Sarasota FL 34232
9. TITLE V
10. NAME Bontrager, Todd
11. STREET ADDRESS 5035 Webber St
12. CITY-STATE-ZIP Sarasota, FL 34232
13. TITLE S
14. NAME McBride, Abby
15. STREET ADDRESS 4346 Arrow Ave
16. CITY-STATE-ZIP Sarasota, FL 34232
17. TITLE S/V
18. NAME Schnering, Eric C
19. STREET ADDRESS 6316 Bikini Rd
20. CITY-STATE-ZIP Sarasota FL 34241
21. TITLE
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23. STREET ADDRESS
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94. NAME
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96. CITY-STATE-ZIP
97. TITLE
98. NAME
99. STREET ADDRESS
100. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE, OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leon Beiler, P/D

1-24-96

941-377-4683

CR2E034 (12/95)