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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M75557** (2)

1. Corporation Name
REDUCTION MACHINERY & SUPPLY, INC.

Principal Place of Business	Mailing Address
130 LUNKER LODGE RD ~~000 LUNKER LODGE ROAD~~ GEORGETOWN FL 32139 US	PO BOX 655 ~~14750 BEACH BLVD. #58~~ ~~GEORTETOWN~~ FL 32139-0655 GEORGETOWN US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 130 LUNKER LODGE RD	26 PO BOX 655	03/31/1988	04/29/1996
Suite, Apt. #, etc. 22 ~~GEORGETOWN~~,	Suite, Apt. #, etc. 27	4. FEI Number 59-2888756	☐ Applied For ☐ Not Applicable
City & State 23 GEORGETOWN, FL	City & State 28 GEORGETOWN, FL	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Zip / Country 24 32139 / 25 US	Zip / Country 29 32139 / 30 US	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LEWIS, HERBERT H. 130 LUNKER LODGE RD GEORGETOWN FL 32139	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 607.1508, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LEWIS, HERBERT H.		1.2 NAME		
STREET ADDRESS	130 LUNKER LODGE RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	GEORGETOWN FL		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LARGENT, CHRISTINE L.		2.2 NAME		
STREET ADDRESS	130 LUNKER LODGE RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	GEORGETOWN FL		2.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		☑ Change ☐ Addition
NAME	WILEWIS, EDITH		3.2 NAME	LEWIS, EDITH W.	✓ CORRECT
STREET ADDRESS	130 LUNKER LODGE RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	GEROGETOWN FL		3.4 CITY-ST-ZIP	GEORGETOWN, FL	
TITLE	VD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LARGENT, DILLARD		4.2 NAME		
STREET ADDRESS	130 LUNKER LODGE RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	GEORGETOWN FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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. 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: _____ HERBERT H. LEWIS PRES. 4-19-97 (904)467-3240

CR2E034 (9/96)