FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 AM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M99650 (7)

1. Corporate Name
C & D EQUIPMENT, INC.

Principal Place of Business
% CONNER DOUGLAS B.
P.O. BOX 2522
TAMPA FL 33601

Mailing Address
% CONNER DOUGLAS B.
P.O. BOX 2522
TAMPA FL 33601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/01/1988
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business
21
Suite Apt. # or
22
City & State
23

2a. Mailing Address
26
Suite Apt. # or
27
City & State
28

4. FEI Number: 59-2910315 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. This corporation was initially for business in Florida on (Date)
Florida Statutes ☒ Yes ☐ No

24 25 29 30

9. Name and Address of Current Registered Agent

DOUGLAS B. CONNER
4100 EAST SEVENTH AVENUE
TAMPA FL 33605

10. Name and Address of New Registered Agent

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 Section 607.1005, Florida Statutes, the above named corporation submits the 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 607.325, Florida Statutes.

SIGNATURE

12. OFFICER/DIRECTOR CODE		13. ADDITIONS, CHANGES, DELETIONS AND DIRECTORS	
	D		OMIT ☒ Change ☐ Addition
NAME	CONNER, J.W., JR.	NAME	DECEASED
STREET ADDRESS	4100 EAST SEVENTH AVE	STREET ADDRESS	
CITY	TAMPA FL	CITY	
	STD		☐ Change ☐ Addition
NAME	CONNER, DOUGLAS B.	NAME	
STREET ADDRESS	4100 EAST SEVENTH AVE	STREET ADDRESS	
CITY	TAMPA FL	CITY	
	S		V ☒ Change ☐ Addition
NAME	CONNER, III, J.W.	NAME	CONNER, III, J. W.
STREET ADDRESS	4100 EAST SEVENTH AVE	STREET ADDRESS	4100 EAST SEVENTH AVE.
CITY	TAMPA FL	CITY	TAMPA, FL 33605
	P		P/D ☒ Change ☐ Addition
NAME	CONNER, DONALD L.	NAME	CONNER, DONALD L.
STREET ADDRESS	4100 EAST SEVENTH AVE	STREET ADDRESS	4100 EAST SEVENTH AVE.
CITY	TAMPA FL	CITY	TAMPA, FL 33605
			D ☐ Change ☒ Addition
NAME		NAME	CONNER, JACK R., SR.
STREET ADDRESS		STREET ADDRESS	4100 EAST 7TH AVE.
CITY		CITY	TAMPA, FL 33605
			☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	

14. To the best of my knowledge, the information contained herein is true, correct and complete. I am familiar with and authorized to execute this report on behalf of the corporation. I understand that the signature below constitutes my acceptance of the appointment as registered agent and my agreement to comply with the provisions of Florida Statutes relative to keeping open said office. I further understand that the signature below is required by Chapter 607, Florida Statutes, and that, pursuant to Section 607.0122(6), Florida Statutes, the signature below may be accepted by the Department as prima facie evidence of the signatory's authority to sign on behalf of the corporation.

SIGNATURE: Douglas B. Conner — Douglas B. Conner — 4/24/95 — 813 247-4441
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

0442205 FP