## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005220

Entity Name: EQUIPPERS INTERNATIONAL, INC.

FILED Jan 22, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6198 QUAIL RIDGE DR PORT ORANGE, FL 32128 **Current Mailing Address: New Mailing Address:** 6198 QUAIL RIDGE DR PORT ORANGE, FL 32128 FEI Number: 59-3740743 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUNCAN, TONY 6198 QUÁIL RIDGE DRIVE PORT ORANGE, FL 32128 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DUNCAN, ANTHONY J Name: Name: 6198 QUAIL RIDGE DR Address: Address: City-St-Zip: POIRT ORANGE, FL 32128 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: DUNCAN, SHEILA G Name: Address: 6198 QUAIL RIDGE DR Address: City-St-Zip: POIRT ORANGE, FL 32128 City-St-Zip: Title: () Delete Title: () Change () Addition GAGEL, ROXANNE Name: Name: 87 1/2 RIVERSIDE DR Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: BELL, ELIZABETH Name: 6255 WILLIAMSON BLVD #1338 Address: Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: Title: Title: () Delete () Change () Addition OUTTEN, JAMAL Name: Name: 6325 WILLIAMSON BLVD #321 Address: Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WATERS, SHANNON OUTTEN, TAMECKA Name: Name: Address: 2317 S VOLUSIA AVENUE #40 Address: 6325 WILLAMSON BLVD #321 ORANGE CITY, FL 32763 City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAMECKA OUTTEN TD 01/22/2004