

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001353

FILED
Jun 02, 2004
Secretary of State

Entity Name: FLORIDA CONTRACTOR RENTALS, INC.

Current Principal Place of Business:

3540 AGRICULTURAL CENTER DRIVE
SUITE 101
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

3510 AGRICULTURAL CENTER DRIVE
ST. AUGUSTINE, FL 32092

Current Mailing Address:

3540 AGRICULTURAL CENTER DRIVE
SUITE 101
ST. AUGUSTINE, FL 32092

New Mailing Address:

PO BOX 1750
ST. AUGUSTINE, FL 32085

FEI Number: 80-0031238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFIELD, CLIFTON E
3529 KILGALLEN COURT
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

SHEFFIELD, CLIFTON E
PO BOX 1750
ST. AUGUSTINE, FL 32085 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:

06/02/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHEFFIELD, CLIFTON E
Address: 3529 KILGALLEN COURT
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHEFFIELD, CLIFTON E
Address: PO BOX 1750
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: VP () Change (X) Addition
Name: SHEFFIELD, JOHN I
Address: PO BOX 1750
City-St-Zip: ST. AUGUSTINE, FL 32085

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN I. SHEFFIELD

VP

06/02/2004

Electronic Signature of Signing Officer or Director

Date