

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000001353

Entity Name: FLORIDA CONTRACTOR RENTALS, INC.

FILED  
Oct 05, 2006  
Secretary of State

## Current Principal Place of Business:

3510 AGRICULTURAL CENTER DRIVE  
ST. AUGUSTINE, FL 32092

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1750  
ST. AUGUSTINE, FL 32085

## New Mailing Address:

PO BOX 900  
BUNNELL, FL 32110

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  
PO BOX 1750  
ST. AUGUSTINE, FL 32085 US

## Name and Address of New Registered Agent:

SHEFFIELD, CLIFTON E  
99 OLD KINGS ROAD SOUTH, UNIT 1A  
FLAGLER BEACH, FL 32136 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: CLIFTON E. SHEFFIELD

10/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SHEFFIELD, CLIFTON E  
Address: 99 OLD KINGS ROAD SOUTH, UNIT 1A  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VP (X) Change ( ) Addition  
Name: SHEFFIELD, JOHN I  
Address: 99 OLD KINGS ROAD SOUTH, UNIT 1A  
City-St-Zip: FLAGLER BEACH, FL 32136

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CLIFTON E. SHEFFIELD

D

10/05/2006

Electronic Signature of Signing Officer or Director

Date