2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 22, 2006
Secretary of State

DOCUMENT# P05000086085

Entity Name: NORTH FLORIDA EQUIPMENT RENTALS, INC

Current Principal Place of Business:

165 SW 4TH AVE
LAKE BUTLER, FL 32054

New Principal Place of Business:

Current Mailing Address:

165 SW 4TH AVE
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 20-3057636 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MAINES, JOHN E IV
10 WEST MAIN STREET
LAKE BUTLER, FL FL 32054 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: KITCHENS, JAMES L
Address: 355 NW 2ND STREET
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: SECR ( ) Delete
Name: KITCHENS, JOAN S
Address: 355 NW 2ND STREET
City-St-Zip: LAKE BUTLER, FL 32054 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MAST, IVAN R
Address: 165 SW 4TH AVE
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: SECR (X) Change ( ) Addition
Name: MAST, DWIGHT G
Address: 165 SW 4TH AVE
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: VP ( ) Change (X) Addition
Name: MAST, LAVERN D
Address: 165 SW 4TH AVENUE
City-St-Zip: LAKE BUTLER, FL 32054 US

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: LAVERN D. MAST VP 03/22/2006

Electronic Signature of Signing Officer or Director — Date