

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000092544

FILED
Jun 18, 2009
Secretary of State**Entity Name:** TERRA EQUIPMENT SALES, INC.**Current Principal Place of Business:**7280 PELAS CIR
N FT MYERS, FL 33917**New Principal Place of Business:****Current Mailing Address:**7280 PELAS CIR
N FT MYERS, FL 33917**New Mailing Address:****FEI Number:** 13-4339582**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FOSHEE, JULIAN G JR
7280 PELAS CIR
N FT MYERS, FL 33917 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: PD () Delete
Name: FOSHEE, JULIAN G JR
Address: 7280 PELAS CIR
City-St-Zip: N FT MYERS, FL 33917

Title: VPD () Delete
Name: SANDERS, CURTIS J
Address: 5180 WES MAR RD.
City-St-Zip: FORT MYERS, FL 33905

Title: S (X) Delete
Name: FOSHEE, ANN M
Address: 7280 PELAS CIR
City-St-Zip: N FT MYERS, FL 33917

Title: T (X) Delete
Name: SANDERS, KELLY J
Address: 5180 WES MAR RD
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: FOSHEE, ANN M
Address: 7280 PELAS CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ANN FOSHEE

VPD

06/18/2009

Electronic Signature of Signing Officer or Director

Date