## **\*FILE NOW: FILING FEE AFTER MAY 1 IS \$55D.00**

**PROFIT** CORPORATION ANNUAL REPORT 1997

CITY-ST-ZIP

appears in Block 12 or Block 13 if

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 06 1997 8:00am

Secretary of State

Change

[\_] Addition

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Sandra B. Mortham

Sccretary of State DIVISION OF CORPORATIONS

## **DOCUMENT** # P93000011550 (9)

ORLANDO MACK SALES AND SERVICE, INC.

Principal Disc	sa of Business	Mailina Address			····	-			
Principal Place of Business Mailing Address  POST OFFICE BOX 311 P.O. BOX 2880								'85'	
HIGHWAY 121 JACKSONVILLE FL 32203-2880									
LAKE BUTLER	7 FL 32054					3. Date Incorporated or Qualified 3a. Date of Last Report 02/03/1993 05/01/1996			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	1 00/		pplied For
ती ं	•	26				59-3184101		——————————————————————————————————————	ot Applicabl
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	27			5. Certificate of Status Desired S8.75 Addit Fee Require			Additional
City & Stat	le	City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cou	ntry	/	8. This corporation has liability for	intangible	lax under s	s. 199.032,
4	25	29	30				Yes [		
<del></del>	9, Name and Address of Curren	Registered Agent			T	10. Name and Address of New Re	gistered A	gent	
	ITH, HULSEY & BUSEY			81	Narno				
1800 FIRST UNION NATIONAL BANK TOWER				82	Street Addre	dress (P.O. Box Number is Not Acceptable)			
	S WATER ST.		,	83					
JAL	CKSONVILLE FL 32202			ರು					
			1	84	City			<b>85</b> Zip	Code
44 5	- No. 10 to				l	pration submits this statement for the p	FL	1.1	
SIGNATURE	am familiar with, and accopt the obligation of registered age				ent signature <b>req</b> uire	d when reinstabog)	DATE		e
12.	OFFICERS AND	Carlo and the first transfer of the comment of the	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	CEO			LE				Change	Additio
NAME	PRITCHETT, MARVIN H		1.2 NA	ME					
STREET ADDRESS	HWY 100		1.3 ST	REF1	ADORESS				
CITY-ST-ZIP	LAKE BUTLER FL 32054				S1 - ZIP				
TITLE	P DETOLITE JONIAN		2.1 111					☐ Change	[_] Addilio
NAME	PRITCHETT, JON W		2.2 NA						
STREET ADDRESS	5213 S.W. 94TH GAINESVILLE FL 32608				ADDRESS				
CITY-ST-ZIP	GAMESVILLE PL 32008	DELETE	······································		S1-21P				TT 4 7 885
TITLE		L_J DURER	3.1 HI					Change	Addilio
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
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NAME		□ 90101¢						Change	[_] AUUIIIU
name Street address			4. \$ N/		V V V V V V V V V V V V V V V V V V V				
STHEET ADDRESS CITY-ST-ZIP					ADDRESS				
TITLE		DOLLFIE	4.4 CIT 5.1 HJ		.1 - ZIF			Change	Additio
NAME	1		5.2 NA					Onlings	F=1 FROUND
STREET ADDRESS					LADDRESS				

DELETE

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name