FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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May 14 1997 8:00am

Secretary of State

Daylime Phone #

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000033420 (9)

JOHN W. NICHOLS SALES, RENTAL & LEASING, INC.

Principal Place of Business Mailing Address 2801 9TH STREET, WEST 2001 9TH STREET, WEST BRADENTON FL 34205-6956 **BRADENTON FL 34205** 3. Date Incorporated or Qualified 3a. Date of Last Report 05/06/1993 06/26/1996 2. Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 65-0411712 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name NICHOLS, JOHN W 2801 9TH STREET, WEST Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34205** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. P/S DELETE Change Thirf 1.1 TOTLE Addition JOHN W. NICHOLS NAME: 1.2 NAME 679 KEY ROYAL DR 1.3 STREET ADORESS STREET ADDRESS HOLMES BCH FL 34217 CITY - ST - 7IP 1.4 City-\$t-ziP DELETE Addition TITLE 2.1 TITLE Change NAME: 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZiP DELETE TILLE 3.1 THILE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST 28 DELETE Change Addition TILLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE THE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - \$1 - ZIF 5.4 CITY-ST-ZIP DELETE Change Addition TILLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - S1 - ZIP 6.4 CITY-ST-ZIP

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 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 in Block 12 o WW. Mullelanner

SIGNATURE