FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 MAR -7 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000082283 (0)

1. BAY TRACTOR & EQUIPMENT, INC.

320 COKER RD.
PANAMA CITY FL 32409

320 COKER RD.
PANAMA CITY FL 32409

3. 10/26/1994

3a. Date of Last Report

4. FEI Number: 65-0550148 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangibles tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

TATE, MICHAEL Q
233 TATES LANE
PANAMA CITY FL 32409

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Michael Q Tate 3-3-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	DP	11 TITLE	☐ Change ☐ Addition
12 NAME	TATE, CALVIN	12 NAME	
13 STREET ADDRESS	% 320 COKER RD.	13 STREET ADDRESS	
14 CITY-ST-ZIP	PANAMA CITY FL 32409	14 CITY-ST-ZIP	
21 TITLE	V	21 TITLE	☐ Change ☐ Addition
22 NAME	TATE, MICHAEL Q	22 NAME	
23 STREET ADDRESS	% 320 COKER RD.	23 STREET ADDRESS	
24 CITY-ST-ZIP	PANAMA CITY FL 32409	24 CITY-ST-ZIP	
31 TITLE	S	31 TITLE	☐ Change ☐ Addition
32 NAME	FAYE, SHARON	32 NAME	
33 STREET ADDRESS	% 320 COKER RD.	33 STREET ADDRESS	
34 CITY-ST-ZIP	PANAMA CITY FL 32409	34 CITY-ST-ZIP	
41 TITLE	T	41 TITLE	☐ Change ☐ Addition
42 NAME	FAYE, WANDA	42 NAME	
43 STREET ADDRESS	% 320 COKER RD.	43 STREET ADDRESS	
44 CITY-ST-ZIP	PANAMA CITY FL 32409	44 CITY-ST-ZIP	
51 TITLE		51 TITLE	☐ Change ☐ Addition
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY-ST-ZIP		54 CITY-ST-ZIP	
61 TITLE		61 TITLE	☐ Change ☐ Addition
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I declare, with that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date

0410547 FP