

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000014787

1. Entity Name
PARTRIDGE EQUIPMENT SALES, INC.

FILED

04 OCT -7 AM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

7232 SAND LAKE ROAD
SUITE 101
ORLANDO, FL 32819 US

Mailing Address

7232 SAND LAKE ROAD
SUITE 101
ORLANDO, FL 32819 US

2. Principal Place of Business

480 N. Orlando Ave

3. Mailing Address

480 N. Orlando Ave

Suite, Apt. #, etc.

Suite 218

Suite, Apt. #, etc.

Suite 218

City & State

Winter Park FL

City & State

Winter Park FL

Zip

32789

Country

USA

Zip

32789

Country

USA

09272004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3300596

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARCO, CARROLL S SR
6220 S. ORANGE BLOSSOM TRAIL
SUITE 194
ORLANDO, FL 32809

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 20049. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	GIBBINGS, M.J.R.	
STREET ADDRESS	MILLHOUSE, WITHLEIGH	
CITY - ST - ZIP	TIVERTON, EX	

TITLE	D	☐ Delete
NAME	GIBBINGS, A.A.R.	
STREET ADDRESS	MILLHOUSE, WITHLEIGH	
CITY - ST - ZIP	TIVERTON, EX	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS	100041653781	
CITY - ST - ZIP	10/06/04--01047--001 **150.00	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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CITY - ST - ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director 1st Sept 2004

Date

Daytime Phone #