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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

Principal Place, of Business

CITY - ST - ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 23 1997 8:00am

Secretary of State

Daytime Phone #

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # **P95000047575 (2)**

## PRENTICE EQUIPMENT CORPORATION

240 SOUTH PINE AVENUE INVERNESS 24452 240 SOUTH RINE AVENUE INVERNESS FL 34452-4838 214 S. PINE AVE 5. Pine Ave 3a. Date of Last Report 3. Date Incorporated or Qualified Inverness FL 34454 PC 34452 06/15/1995 03/22/1996 INVERNESS 2a. Mailing Address 4, FEI Number 2. Principal Place of Business Applied For 59-3313910 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Country Zip Country Zφ 8. This corporation has liability for intangible tax under s. 199.032, 24 25 30 Florida Statutes Yes No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DOWNEY, KEVIN I 2631 N.W. 41ST STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A-2 83 GAINESVILLE FL 32606 84 City 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 Signature, typical or printed name of regulacied agent and title if applicable (NOTE: flegistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change \_\_\_ Addition 1.1 TITLE TITLE KING, WILLIAM D NAME 1.2 NAME 2631-A N.W. 41ST STREET STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL 32606** CITY - ST. ZIE 14 City-St-ZiP DELETE Change Addition TITLE 21 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-S1-7/P 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-2IP 3.4 CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 4.1 DILE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition THILE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZiP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Change Addition THE 6.2 NAME MAME STREET ADORESS 6.3 STREET ADDRESS

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 information information information information information 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.

Kattleen Frentice

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR