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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000049688 (1)

S & S TRACTOR INC.

Principal Place of Business

Mailing Address

FILED May 20 1998 8:00am Secretary of State



2578 OLD NEW YORK AVENUE DELAND FL 32720		2576 OLD NEW YORK AVENUE DELAND FL 32720			
				DO NOT WRITE IN THIS SPACE	E
				3. Date Incorporated or Qualified 06/23/1995	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2049	III 142000 44	26 2049 W. 1-tr	Mrs. 44	59-3347777	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	3, m-4 —+	S2	.75 Additional
22		27		5. Certificate of Status Desired	ee Required
City & State	J Fi	City & State 28 Deland FZ			5.00 May Be
Zip	Country	Ζφ	Country	8. This corporation owes or has paid the current y	ear Intangible
24 00	ンフン ₂₅	29 32720 3	o	Personal Property Tax due June 30. Yes	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent	<u> </u>
	JRRAY, DEBORAH D		81 Name		
2576 OLD NEW YORK AVENUE			82 Street Address (P.O. Box Number is Not Acceptable)		
DELANO FL 32720					
			83		
			84 City	FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607 0503	2 and 607.1508, Florida Statutes	the above-name	corporation submits this statement for the purpose of chan	ging its registered
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature type or present our ending street agent and title of applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	TD	☐ DELETE	1.1 THLE	President Do	hange
NAME	MURRAY, DEBORAH D	_	1.2 NAME	James mason mikell	;
STREET ADDRESS	2576 OLD NEW YORK AVENU	JE	1.3 STREFT ADDRESS	2049 W. Highway 44	li
CITY-ST-ZIP	DELAND FL 32720		1.4 CITY - ST - ZIP	Deland Fr 32720	<u>-</u>
TITLE		☐ DELETE	2.1 TITLE	Vite President Wo	nange 🔲 Addition 🖁
NAME			2.2 NAME	michael J. Murray	
STREET ADDRESS			2.3 STREET ADDRESS	2506 OID NW YORL AV.	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	Deland Fr 32700	
TITLE		DELETE	3.1 TITLE	Treasurer	nange
NAME			3.2 NAME	Melody Mikell	İ
STREET ADDRESS			3.3 STREET ADDRESS	2019 W.	
CITY-ST-ZIP		Drurr	3.4. CITY-ST-ZIP	Delan PL 32720	/ <u> </u>
TITLE		☐ DELETE	4.1 TITLE	SECretary	nange [] Addition
NAME			4. 2 NAME	2574010 New York AV,	
STREET ADDRESS			4.3 STREET ADDRESS	1 —	
CITY-ST-ZIP		☐ DELETE	4.4 CITY - \$1 - ZIP	Deland FL 32720	ange Addition
TITLE		ב ט טבננונ	5.1 TITLE	ا ا	nange
NAME STOLET ADDOLGG			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		nange Addition
NAME		E DECENT	6.2 NAME]	mage LI Modition
STREET ADDRESS					
* *			63 STREET ADDRESS		
14. I hereby c	certify that the information supplied wi	th this filing does not qualify for t	64 CITY-ST-ZIP the exemption stat	Led in Section 119.07(3)(i), Florida Statutes. I further certify the	at the information
indicated officer or o	on this annual report or supplemental	Lannual report is true and acc ura iver or trustee empo wered to e xc	ate and that my si	gnature shall have the same legal effect as if made under or s required by Chapter 607, Florida Statutes; and that my nar	ith:that lam an 1