


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

FILED

Feb 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000077683 (7)**

1. Corporation Name

HUSTLER TURF EQUIPMENT OF FLORIDA, INC.



Principal Place of Business 8259A CAUSEWAY BLVD. TAMPA FL 33619 US	Mailing Address 8259 A CAUSEWAY BLVD. TAMPA FL 33619 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/05/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 48-1174495	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**LAWSON, GEORGE B
410 TOMAHAWK TRAIL
BRANDON FL 33511**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NIKKEL, VERNON	1.2 NAME	MULLET, Robert
STREET ADDRESS	230 S WEAVER AVENUE	1.3 STREET ADDRESS	24 PARK VIEW RD.
CITY - ST - ZIP	HESSTON KS 67062	1.4 CITY - ST - ZIP	HESSTON, KS. 67062
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENSON, KENT	2.2 NAME	MULLET, Paul
STREET ADDRESS	608 RANDOM ROAD	2.3 STREET ADDRESS	8506 W. DUTCH AVE
CITY - ST - ZIP	HESSTON KS 67062	2.4 CITY - ST - ZIP	HESSTON, KS. 67062
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STUTZMAN, DOUG	3.2 NAME	
STREET ADDRESS	5 FAIRWAY DRIVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	HESSTON KS 67062	3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REDEKOP, CAL	4.2 NAME	
STREET ADDRESS	104 FLINT AVENUE	4.3 STREET ADDRESS	
CITY - ST - ZIP	HARRISBURG VA 22801	4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLET, ROY	5.2 NAME	
STREET ADDRESS	217 KINGSWAY	5.3 STREET ADDRESS	
CITY - ST - ZIP	HESSTON KS 67062	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLET, HENRY	6.2 NAME	
STREET ADDRESS	5107 GREBEL	6.3 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL 34232	6.4 CITY - ST - ZIP	

14. I 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert Mullet **ROBERT MULLET**

1/26/98 316-327-1148

CR2E034 (10/97)