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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000096594 (3)

## D. & D. EQUIPMENT SERVICES, INC.

Principal Place of Business Mailing Address				_					
2633 SETTLERS COLONY 2633 SETTLERS COLON GULF BREEZE FL 32561 GULF BREEZE FL 3256									
						3. Date Incorporated or Qualified 12/20/1995	1	te of Last R	Report
p	ace of Business	2a, Mailing Address				4, FEI Number			pplied For
<b>21</b> Soite, Apt 1	# etc	26			·	59-3354087			ot Applicable Additional
22		27	7			5. Certificate of Status Desired			equired
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zφ	Country Zip C			у		8. This corporation has liability for i	ntangible		
24	25	29	30		·····	<u> </u>	Yes [		
	9. Name and Address of Curren	t Registered Agent	81	Т	Name	10. Name and Address of New Re	gistered A	gent	
	DERPOOL, DANIEL K S SETTLERS COLONY			L					· 1-81
	F BREEZE FL 32561		62	•	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
400	DILLEGE I I VEGOT		83	1	· · · · · · · · · · · · · · · · · · ·	······································			
			84	+	City		Ei	85 Zip	Code
<b>★</b> ¶ Durantant t	o the provisions of Sections 807 050	2 and 607 1508 Florida Status	les the above	<u></u>	named corne	pration submits this statement for the p	FL	changing	te registered
office or re agent Lar SIGNATURE	egistered agent, or both, in the Stale in familiar with, and accept the obliga-	of Florida. Such change was ations of, Section 607.0505, Fl	authorized b orida Statute	y ti	the corporation	on's board of directors. I hereby accep	the appo	ointment as	registered
12.	Signicine is provide provided datase of regenered age OFFICERS ANI		13.	jent	signature required	d when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE ERS AND	DIRECTOR	25 IN 12
Trick	PD	DELETE	1.1 TITLE			ADDITIONO OF TAXABLE TO OF TO	CHO MHO	Change	Addition
NAME	VANDERPOOL, DANIEL K.		1.2 NAME						
STEELT ALJURESS	2633 SETTLERS COLONY		1.3 STREE	TA	DDRESS				
C(1Y-SF-2)P	GULF BREEZE FL		1.4 CITY - !	51.	ZIP				<u></u>
TITLE		☐ DELETE	2.1 TITLE					Change	Addition
NAME			2.2 NAME		20100				
STREET ADDRESS   OFY ST-72			2.3 STREE		· · · · · · · · · · · · · · · · · · ·				
Till!	, , , ,,,,,,,,,,,,,,,,,,,,,,,,,,,	DELETE	31 TITLE	JI.	- 211		<u></u>	Change	Addition
HAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	ΪÁ[	Doress				
COY-SI-7IF			3.4. CITY-	ST-	- ZIP			<del></del>	F-1
TITLE		DELETE	4.1 TITLE					L Change	Addition
NAME CONTRACTOR			4. 2 NAME 4.3 STREE		oparac				
STREET ADDRESS			4.3 STREE						
CIEST STEP TITLE		DELETE	5.1 TITLE	31.	- 211			Change	Addition
NAME			5.2 NAME		}				
STREET ADORESS			5 3 STREE	T A[	DDRESS				
011 y - \$1 - <i>1</i> 30		DELETE	54 DITY-	ST-	ZIP				
TILF		61 THTLE		}			L_ Change	L] Addition	
HAMI			6.2 NAME						
STHEET ACIDRESS			6.3 STREE						
0/1Y-51-79* <b>14.</b> Ldo bereb	ov certify that the information supplies	d with this filing does not qual	6.4 CITY-			in Section 119.07(3)(i), Florida Statute	s I further	certify that	the
information Lain an of	n indicated on this annual report or s	upplemental annual report is the receiver or trustee empoy	true and acc vered to exec	Cul	ate and that r te this report	my signature shall have the same lega as required by Chapter 607, Florida S	l effect as	if made un	nder oath; that

SIGNATURE: JAMAR OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JOHN STORE JOHN SIGNING OFFICER OR DIRECTOR JOHN SIGNING OFFICER OR DIRECTOR