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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600000590 (5)

J & B EQUIPMENT SALES & SERVICE, INC.

1.2 NAME	Principal Place of Business 3970 N US 301 WILDWOOD FL 34785		Mailing Address 3970 N US 301 WILDWOOD FL 34785-8379						
Suite, April #, etc.  City & State  City & State  City & State  City & State  Zig  Country  Zig  Zig  Zig  Zig  Zig  Zig  Zig  Zi							3a. Date	of Last Re	eport
Suite, Apt. #, etc.    Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	lace of Business		ress					
City & State   City & Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Zip	Suite, Apt	#, etc	Suite, Apt. #	, øtc.				8.75 A	Additional
28		e		···		& Floring Compaign Financing	<del></del>		<del>`</del>
21   25   29   30   25   29   30   20   20   30   20   20   20   30   20   2		·							
MICHAEL C. NORYELL, P.A.  1410 EMERSON ST LEESBURG FL 34748  81	Zιρ	Country		Co	untry	8. This corporation has liability for			
MICHAEL C. NORVELL, P.A. 1410 EMERSON ST LEESBURG FL 34748  81	24			30			7		
14   Development   15   15   15   15   15   15   15   1			Current Registered Agent		121	10. Name and Address of New F	legistered Age	nt	
LEESBURG FL 34748  84 City  FL 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 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 are the purpose of changing its registered agent agent are made to provide Statutes.  SIGNATURE  Signature  OPFICERS AND DIRECTORS  12. OPFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  NAME  1.2 NAME  1.2 NAME  1.2 NAME  1.3 SIREET ADDRESS  CITY ST-7P  DELETE  1.1 TITLE  P  Change Addition  Addi					81 Name				
Bas   City   FL   Bas   Zip Code					82 Street A	ddress (P.O. Box Number is Not Accept	able)		····
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 agent. Jam familiar with, and accept the obit gations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITHE  NAME  12. ITHE  NAME  12. PARAME  13. STREET ADDRESS  CDY. ST. 782  14. CITY. ST. 219  DELETE  13. THILE  DELETE  14. CITY. ST. 219  DELETE  15. STREET ADDRESS  CDY. ST. 782  16. DELETE  17. TILE  DELETE  18. OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  Change  Addition  Addition  Addition  STREET ADDRESS  CITY. ST. 219  DELETE  17. TILE  DELETE  17. TILE  DELETE  17. TILE  DEBORAH R. COLEMAN  3.3 STREET ADDRESS  CITY. ST. 219  SUMMERY/ST. 219  SUMMERY/ST. 219  SUMMERY/ST. 219  SUMMERY/ST. 219  SUMMERY/ST. 219  SUMMERY/ST. 219  Change  Addition  Additi	LEER	SBURG FL 34/48			83				· · · · · · · · · · · · · · · · · · ·
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 agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  NAME  12. NAME  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  NAME  12. AND  13. COLEMAN  13. STREET ADDRESS  CITY, ST-2P  14. CITY, ST-2P  15. TILLE  16. TILLE  17. TILLE  18. TILLE  18. TILLE  19. TILLE									
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DELETE	-9		, g						
1.2 NAME							DATE		
1.3 STREET ADDRESS   4484 C.R. 526   Sumterville, FL 33585   Sumterville, FL	12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	DATE ICERS AND DI	· · · · · · · · · · · · · · · · · · ·	S IN 12
14 CITY-SI-ZIP   Sumterville, FL 33585     DELETE   21 TITLE   V/S/T   Change   Addition     NAME   22 NAME   DEBORAH R. COLEMAN     STREET ADDRESS   24 CITY-SI-ZIP   Sumterville, FL 33585     TITLE   DELETE   31 TITLE   Change   Addition     NAME   32 NAME   STREET ADDRESS     Sumterville, FL 33585   CHANGE   Addition     STREET ADDRESS   33 STREET ADDRESS     CITY-SI-ZIP   34 CITY-SI-ZIP   Change   Addition     STREET ADDRESS   34 CITY-SI-ZIP   Change   Addition     STREET ADDRESS   34 CITY-SI-ZIP   Change	12. TILE		RS AND DIRECTORS	13. ELETE 1.11	TITLE :	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DI	· · · · · · · · · · · · · · · · · · ·	
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THILE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME           STREET ADDRESS         3.3 STREET ADDRESS           CITY-ST-ZIP         3.4. CITY-ST-ZIP	12. TILE NAME STREEL ADDRESS CITY-SI-7P2 THLE		RS AND DIRECTORS	13. ELETE 1.11 1.21 1.33 1.40 ELETE 211	TITLE NAME STREET ADORESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFF P BRIAN E. COLEMAN 4484 C.R. 526 Sumterville, FL 3 V/S/T	DATE ICERS AND DI	Change	S IN 12
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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 indicated on this annual report or supplemental angular 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an analysment with an address.

6.4 CITY - ST - ZIP

SIGNATURE: SIGNATURE SIGNATURE AND TYPED ON PRINTED NAME OF SIGNAND OFFICER OR DIRECTO

345/97 (352)748-255

**FILED** 

Mar 28 1997 8:00am

Secretary of State

CR2E034 (9/96)