## 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 # P96000007480 (2)

**ROGERS TRACTOR SERVICE INC** 

1	
	Principal Place of Business
	1126 LAND O'LAKES BLVD LUTZ FL 33549

## **FILED** Feb 13 1998 8:00am Secretary of State



Mailing Address 1126 LAND O'LAKES BLVD LUTZ FL 33549 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/22/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3356308 21 Not Applicable 26 Suite, Apl. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 **Trust Fund Contribution** Added to Fees 28 Zıp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered 9. Name and Address of Current Registered Agent Name ROGERS, JEFF B 81 9617 27TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33612** 83 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 obliquations of, Section 607.0505, Florida Statutes. Ruby M Ko SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CRZE034 (10/97 12. 13. DELETE Change Addition 1.1 TITLE TITLE ROGERS, JEFF B 1.2 NAME NAME **9617 27TH STREET** 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE ROGERS, RUBY M NAME 2.2 NAME 9617 27TH STREET STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change 4 1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELLETE Change Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP Addition DELETE ☐ Change 61 TITLE TITLE NAME 62 NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY-SI-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 supplimental 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 or an attachment with an address.

SIGNATURE: X AND ROSE