

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 96000025292

1. Corporation Name

MIKE QUINN EQUIPMENT CO.,

Principal Place of Business

Mailing Address

312 POINSETT DRIVE
COCOA, FLORIDA 32922

1713 JORDAN DRIVE
ROCKLEDGE, FL. 32955

(Not sure what address was given)

3. Date Incorporated or Qualified

MARCH 18, 1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-3384044

Applied For

Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

22. City & State

27. City & State

6. Election Campaign Financing

☐ \$5.00 May Be

23. Zip

Country

28. Zip

ROCKLEDGE, FLORIDA

Country

Trust Fund Contribution

☐ Added to Fees

24. Zip

Country

29. Zip

32955

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MICHAEL D. QUINN
1713 JORDAN DRIVE
ROCKLEDGE, FLORIDA 32955

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

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 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 name of registered agent, and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE: President/Director
NAME: Michael D. Quinn
STREET ADDRESS: 1713 Jordan Dr. Rockledge Fla
CITY- ST- ZIP: 32955

☐ DELETE

TITLE: Vice. President/Director
NAME: Rick Bilodeau
STREET ADDRESS: 1719 Hubbard Dr. Rockledge Fla
CITY- ST- ZIP: 32955

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

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TITLE:
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

600002160926

-05/01/97--01002--027

***165.00

☐ Change ☐ Addition

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 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:  MICHAEL D. Quinn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-97 (407)633-6115

Date

Daytime Phone #

CR2E034 (9/96)