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 # **P96000025659** (9)

CHOICE MOWER SALES & SERVICE INC.

Principal Place of Business Mailing Address					100112001 178 18719 84114 84111 90114 80111	OBSIN 11881 BISIN OLIDI BISIN INSI 1881
18260 PAULSON DRIVE PORT CHARLOTTE FL 33954		18260 PAULSON DRIVE PORT CHARLOTTE FL 33854-1040				
					3. Date Incorporated or Qualified 03/15/1996	3a. Date of Last Report
	lace of Business	2a. Mailing Address	•		4. FEI Number	Applied For
21		26			65-0648068	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	28		6. Etection Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζ·ρ 24	Country 25	Zip 29	Coun	try	8. This corporation has liability for in Florida Statutes	intangible tax under s. 199.032, Yes X No
=	9. Name and Address of Currer		18-1		10. Name and Address of New Re	gistered Agent
JOH	NSON, CARL J JR			11 Name		
18260 PAULSON DRIVE PORT CHARLOTTE FL 33954				Street Add	ress (P.O. Box Number is Not Acceptab	ole)
	019412011212		1	3		
				4 City		85 Zip Code
	10					
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
- 5	m familiar with, and accept the obliga-	ations of, Section 607.0505,	Florida Statu	tes.		
SIGNATURE	Signature injury or proceed to the of regularizations	art and tool (applicable (N	OTE: Registered	Agent signature requ	ired when reinstating)	DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	D CARLON CARL LIB	☐ DELETE	1.1 TITL	E		Change Addition
NAME	JOHNSON, CARL J JR		1.2 NAN	E		
STREET ADDRESS 23207 ABRADE AVE PORT CHARLOTTE FL 33980			1 3 STREET ADDRESS			l
CITY-ST-ZiP	PUHI CHARLUTTE PL 33900	DELETE		-ST-ZIP		Change Addition
1:fLE			2.1 T(7L			Change Addition
NAME			2 2 NAN	· .		
STREET ADORESS				EET ADDRESS		er e
CITY+ST-ZIP TITLE		DELETE	2. 4 UII 3.1 TITL	Y - ST - ŽIP		Change Addition
NAME			3.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY - ST - ZIP				Y-ST-ZIP		
TITLE		DELETE	4.1 THU			Change Addition
NAME			4. 2 NA	-		
STREET ADDRESS				EET ADDRESS		
CITY - S1 - ZIP				-ST-ZIP		į
TITLE		DELETE	5.1 TiTL			Change Addition
NAME			5 2 NAA	1		
STREET ADDRESS				EET ADDRESS		
CITY S1-7IP				- ST - ZIP		
THE		DELETE	6 1 TITL			Change Addition
NAME			6 2 NAM			-
STREET ADDRESS				EET ADDRESS	v.	
]			I 3			

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:

Carl J. Johnson Jr

1/16/97 (941)255-550

FILED

Jan 24 1997 8:00am

Secretary of State

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2E034 (9/96)