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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100281

WALTERS-SCHRADER AUCTION COMPANY, INC.

200 TUMBLIN KLING ROAD 200 TUMBLIN KLING ROAD FORT PIERCE FL 34982 FORT PIERCE FL 34982-6838 3. Date Incorporated or Qualified 3a. Date of Last Report 12/11/1996 2. Principal Place of Business 2a, Mailing Address 4. FELNumber Applied For 65-07128 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALTERS, MARK 200 TUMBLIN KLING ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **FORT PIERCE FL 34982** 83 84 Zip Code \$1. 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, typod or printed name of registered agont and title if applicable (NOTE: Begistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DĚLÉTĚ TITLE LÍ TILE ☐ Change ___ Addition SCHRADER, REX NAME 1.2 NAME 209 W VANBUREN STREET STREET ADDRESS 1.3 STREET ADDRESS **COLUMBIA CITY IN 46725** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELFTE TITLE Addition 213006 Change WALTERS, MARK NAME 2.2 NAME 200 TUMBLIN KLING ROAD STREET ADDRESS 2.3 STREET ADDRESS FORT PIERCE FL 34982 CITY-ST-ZIP 2 4 CITY-\$1-21P DELETÉ TITLE 3.1 THLE Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELFIE TITLE Change Addition 4.11000 NAME 4.2 NAME

6.4 CITY-ST-7IP 14. I do hereby certify that the information supplied with this filling 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.

4.3 STREET ADDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-\$1-7P

4.4 CITY-ST-7IP

51 HH

5.2 NAME

6 1 111LE

6.2 NAME

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CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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DELETE

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Addition

Addition

FILED

May 20 1997 8:00am

Secretary of State