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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAR 23 AM 10:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # S15350

(9)

1. Corporation Name

MORRIS EQUIPMENT COMPANY, INC.

Principal Place of Business

936 CITRUS AVENUE  
SARASOTA FL 34236  
US

Mailing Address

936 CITRUS AVENUE  
SARASOTA FL 34236  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/21/1990

3a. Date of Last Report

02/08/1994

4. FEI Number

65-0233378

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fees Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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

☐

Yes

☒

No

2. Principal Place of Business

21 1433 FLOWER DR.

2a. Mailing Address

26 1433 FLOWER DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 SARASOTA FL

City & State

28 SARASOTA FL

Zip

24 34239

Country

25 USA

Zip

29 34239

Country

30 USA

9. Name and Address of Current Registered Agent

DUMBAUGH, JOHN D.  
SYPRETT, MESHAD, RESNICK & LIEB, P.A.  
1900 RINGLING BLVD.  
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

J. Z. MORRIS

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

1433 FLOWER DR.

83

84 City

SARASOTA

FL

85 Zip Code

34239

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

*J. Z. Morris*  
Signature typed or printed name of registered agent and fee if applicable.

J. Z. MORRIS

(NOTE: Registered Agent signature required when reappointing)

MAR 7, 1995

Date

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MORRIS, JOSEPH Z.  
STREET ADDRESS 936 CITRUS AVENUE  
CITY-ST-ZIP SARASOTA FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D

☒ Change ☐ Addition

1.2 NAME

J. Z. MORRIS

1.3 STREET ADDRESS

1433 FLOWER DR.

1.4 CITY-ST-ZIP

SARASOTA - FL - 34239

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

*J. Z. Morris*

J. Z. MORRIS

MAR 7, 95

813  
954-3573

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #