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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 05, 1999 8:00 am  
Secretary of State

03-05-1999 90059 024 \*\*\*150.00

DOCUMENT # V10748

1. Corporation Name

GENERAL TRACTOR AND EQUIPMENT COMPANY

Principal Place of Business

P.O. BOX 607297  
ORLANDO FL 32860-7297

Mailing Address

P.O. BOX 607297  
ORLANDO FL 32860-7297

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/28/1992

4. FEI Number

59-3113616

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

GREENE, PAUL  
5626 PARTRIDGE DR  
ORLANDO FL 32810

10. Name and Address of New Registered Agent

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 or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TSD ☒ DELETE

NAME BROWN, SHERWIN O  
STREET ADDRESS 379 SPANISH TOWN RD  
CITY-ST-ZIP KINGSTON JA

TITLE PD ☒ DELETE

NAME GREENE, PAUL  
STREET ADDRESS 5626 PARTRIDGE DR  
CITY-ST-ZIP ORLANDO FL 32810

TITLE D ☒ DELETE

NAME VERNON, N.P.  
STREET ADDRESS 379 SPANISH TOWN RD  
CITY-ST-ZIP KINGSTON, JAMAICA

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME ~~RE~~ DIRECTOR  
BROWN, SHERWIN O  
1.3 STREET ADDRESS 379 SPANISH TOWN RD  
1.4 CITY-ST-ZIP KINGSTON JA

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME PRESIDENT, TREASURER D.  
GREENE, PAUL  
2.3 STREET ADDRESS 5626 PARTRIDGE DR  
2.4 CITY-ST-ZIP ORLANDO FL, 32810

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME DIRECTOR  
VERNON, N. P.  
3.3 STREET ADDRESS 379 SPANISH TOWN RD  
3.4 CITY-ST-ZIP KINGSTON JA

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME SECRETARY  
GREENE, LYNCH  
4.3 STREET ADDRESS 5626 PARTRIDGE DR.  
4.4 CITY-ST-ZIP ORLANDO FL, 32810

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul Greene

February 16, 1999

407-290-0048

Date

Daytime Phone #

0107702

CR2E034 (11/98)