

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V41953** (3)

1. Corporation Name

AVON GRADALL RENTAL, INC.



Principal Place of Business

**105 B WEYBRIDGE CIR
ROYAL PALM BEACH FL 33411-1557**

Mailing Address

**105 B WEYBRIDGE CIR
ROYAL PALM BEACH FL 33411-1557**

3. Date Incorporated or Qualified

06/08/1992

3a. Date of Last Report

06/26/1995

2. Principal Place of Business

2a. Mailing Address

21 13025 Compton Rd.

26 13025 Compton Rd.

4. FEI Number

65-0293881

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

22

City & State

23 Loxahatchee, FL.

27

City & State

28 Loxahatchee, FL.

24 33470

Country

25 Palm Beach

29 33470

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AVON, RONALD A
105 B WEYBRIDGE CIR
ROYAL PALM BEACH FL 33411-1557**

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 607.0532 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 of Registered Agent or Registered Agent in Charge

(If not Registered Agent signature required when re-stating)

DATE

6/6/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE
NAME **AVON, RONALD A**
STREET ADDRESS **105 B WEYBRIDGE CIR**
CITY - ST - ZIP **ROYAL PALM BEACH FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **VP** ☐ DELETE
NAME **AVON, KATHLEEN**
STREET ADDRESS **105 B WEYBRIDGE CIRCLE**
CITY - ST - ZIP **ROYAL PALM BEACH FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **ST** ☒ DELETE
NAME **AVON, RICARDO A**
STREET ADDRESS **109-C WEYBRIDGE CIRCLE**
CITY - ST - ZIP **ROYAL PALM BEACH FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 incorporator 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

6/6/96 5617626720

CR2E034 (12/95)