FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V41953

(3)

Mailing Address

AVON GRADALL RENTAL, INC.

FILED
Apr 21 1997 8:00am
Secretary of State

|--|--|

13025 COMPT LOXAHATCHEI US			13025 COMPTON ROAD LOXAHATCHEE FL 33470-4715 US								
00			00				ļ.	3. Date Incorporated or Qualified 06/08/1992		ate of Last F 07/1996	Report
2. Principal F	Place of Busin	ness	2a. Mailing Address	2a. Mailing Address				4. FEI Number		A	pplied For
21			26				J	65-0293881			ot Applicable
Suite, Apt.	•		Suite, Apt. #, etc.	···				5. Certificate of Status Desired		4	Additional equired
City & Stat 23	te 		City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip		Country	Zip	Cou	intry	,		8. This corporation has liability for			s. 199 ,032,
24		25	29	30					Yes		
AVI		and Address of Current	r negistereo Agent		81	Name	*	10. Name and Address of New Ro	gisterea	Agent	·
105	ON, RONAL 5 B WEYBRI YAL PALM I	,				et Address (P.O. Box Number is Not Acceptable)					
į.					84	City				85 Zip	Code
11. Pursuant	to the provis	ions of Sections 607.0502	2 and 607,1508, Florida State	utes, the at	DOVE d.b.	e-named	corpora	ation submits this statement for the s's board of directors. I hereby acce	FL purpose o	changing i	ts registered
agent. I a	am familiar wi	ith, and accept the obliga	liops of, Section 607.0505, F	Florida Stat ⊈S i	utes	3.		4/	//:	19	<u> </u>
12.	Signature, typed	or printed mank of registered ager OFFICERS AND		J1E: Registered	n Age	int signature	t borluper	whon reinstating) ADDITIONS/CHANGES TO OFFI	DATE DERS AND	DIBECTO	25 IN 12
TITLE	P	OT TOURS AT	DELETE	1,170	ILF		D			Change	Addition
NAME	AVON, R	ONALD A		1.2 N/			20	nald A. Avon Rd		ща - · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS		EYBRIDGE CIR				ADDRESS	130	as compton Rd	. •		
CITY-ST-ZIP		ALM BEACH FL				T-21P	100	xa hatcher FL.	330	170	
TITLE	VP		DELETE	2.1 TI			VE	S / TETTE (TE	<u> </u>	Change	Addition
NAME	AVON, KATHLEEN			2.2 NAME			Ka	thleen Avon			
STREET ADDRESS	105 B W	EYBRIDGE CIRCLE		2.3 \$1	REET	ADDRESS	130	thleen Avon Pd	•		
CITY-ST-ZIP	ROYAL P	ALM BEHAC FL		E .		ST-ZIP	ſ	xabatchee FL.		70	
TITLE			DELETE	3.1 Ti				7.		Change	Addition
NAME				3.2 N/	AME						
STREET ADDRESS	İ			3.3 \$1	REET	ADDRESS					
CITY-ST-ZIP	1			3 4. C	HY-S	S1-ZIP					
TITLE]		DELETE	4.1 10					*	Change	Addition
NAME				4. 2 N	AME						
STREET ADDRESS				4.3 S1	REET	ADDRESS					
CITY-ST-ZIP	l			4.4 CI	TY-S	1-2IP	1				
TITLE			DELETE	5.1 1	TLF					Change	☐ Addition
NAME	1			5.2 NA	ME						
STREET ADDRESS				5.3 ST	REET	ADDRESS					
CITY-ST-ZIP :	<u> 151</u>			5.4 CI	1 7 -8	1 - ZIP					
TITLE	.] }. :		☐ DELETE	DELETE 6.1 TITLE						Change	Addition
NAME *	. ;;			6.2 N/	ME		}				
STREET ADDRESS				6.3 \$1	ree1	ADDRESS		•			
CITY-ST-ZIP				6.4 CI			l				
informatio	on Indicated of Officer or direct In B lock 12 o	on this annual report or su	upplemental annual report is	true and a	iccu	irate and	that m	Section 119.07(3)(i), Florida Statute y signature shall have the same leg- s required by Chapter 607, Florida i	ai effect a Matutes; a	s if made ur ind that my	ider oath; that