

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Mar 29, 1999 8:00 am  
Secretary of State

03-29-1999 90098 012 \*\*\*150.00

DOCUMENT # V70894

1. Corporation Name  
GENERAL EQUIPMENT SERVICES INC.

Principal Place of Business

GENERAL EQUIPMENT  
3417 E 7TH AVE  
TAMPA FL 33605  
US

Mailing Address

P O BOX 152  
DOVER FL 33527  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/09/1992

4. FEI Number

59-3139312

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

21 Suite, Apt., #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt., #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

WOOLSEY, EDWARD T.  
14505 DOWNING ST  
DOVER FL 33527

10. Name and Address of New Registered Agent

81 Name Vickie A. Duncan

82 Street Address (P.O. Box Number is Not Acceptable)  
14505 Downing Street

83

84 City Dover

FL

85 Zip Code 33527

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 Vickie A. Duncan

Signature, typed or printed name of registered agent and true if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/22/99  
DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE  
NAME WOOLSEY, EDWARD T.  
STREET ADDRESS 14505 DOWNING ST  
CITY-ST-ZIP DOVER FL

TITLE V ☐ DELETE  
NAME WOOLSEY, PATRICK E.  
STREET ADDRESS 14505 DOWNING ST  
CITY-ST-ZIP DOVER FL

TITLE S ☐ DELETE  
NAME DUNCAN, VICKIE A.  
STREET ADDRESS 14505 DOWNING ST  
CITY-ST-ZIP DOVER FL

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  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME President, Secretary/Treasurer  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

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 for or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Vickie A. Duncan

3/22/99 813-247-6880  
Date Daytime Phone #

CR2E034 (1/98)

0390304