

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H47965

**Entity Name:** C & C EQUIPMENT SALES & REPAIRS, INC.

**Current Principal Place of Business:**

12035-2 PALM LAKE DR.  
JAX, FL 32218

**Current Mailing Address:**

P.O. BOX 26213  
JAX, FL 32226 US

**FEI Number:** 59-2502654

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHITTY, AMELIA  
14800 EDWARDS CREEK ROAD N.  
JACKSONVILLE, FL 32226 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name CHITTY, JESSIE AMELIA  
Address 14800 EDWARD CRK. RD N.  
City-State-Zip: JACKSONVILLE FL

Title P  
Name CHITTY JR, CHARLES UDELL  
Address 14800 EDWARDS CREEK RD. N.  
City-State-Zip: JACKSONVILLE FL 32218

Title T  
Name EDWARDS, RONALD DEWITT  
Address 17238 HODGES ROAD  
City-State-Zip: HILLIARD FL

Title S  
Name EDWARDS, SHARON YVONNE  
Address 17238 HODGES ROAD  
City-State-Zip: HILLIARD FL

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHARON EDWARDS

**SECRETARY**

**02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date