

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90252 017 ***150.00

AV
 05/07/02

DOCUMENT # H46727
 1. Entity Name
PUNTA GORDA RENT-ALL AND SALES CO., INC.

Principal Place of Business % CHARLES E. MANTLE JR. 25115 MARION AVE PUNTA GORDA FL 33950	Mailing Address % CHARLES E. MANTLE JR. 25115 MARION AVE PUNTA GORDA FL 33950
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-2502735	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**MANTLE, CHARLES E. JR.
 25115 MARION AVE
 PUNTA GORDA FL 33950**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL
Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> Delete
NAME	CASKEY, JOHN W. JR.	
STREET ADDRESS	2595 TARPON RD.	
CITY-ST-ZIP	NAPLES FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	MANTLE, CHARLES E. JR.	
STREET ADDRESS	141 DANFORTH DRIVE	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	MANTLE, SUZANNE E.	
STREET ADDRESS	141 DANFORTH DRIVE	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	MANTLE, TIMOTHY D	
STREET ADDRESS	9081 SWISS BLVD	
CITY-ST-ZIP	PUNTA GORDA FL 33932	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	29119 CLARK DR.	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	29119 CLARK DR.	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	33982	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	3	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Suzanne E. Mantle* **SIGNATURE REQUIRED** **SUZANNE E. MANTLE** **4/22/02** **941-637-1511**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)