

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000057589

1. Entity Name
B & B EQUIPMENT RENTALS, INC.



Principal Place of Business
15787 331 SOUTH
FREEPORT, FL 32439

Mailing Address
15787 331 SOUTH
FREEPORT, FL 32439

FILED
Apr 23, 2007 08:00 A
Secretary of State



04162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3588414

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEAVER, CHARLES A
15787 331 SOUTH
FREEPORT, FL 32439

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BEAVER, CHARLES A
STREET ADDRESS	15787 331 SOUTH
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	VP
NAME	PINCKARD, LEE
STREET ADDRESS	15787 33 SOUTH
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	SEC
NAME	PINCKARD, MARY F
STREET ADDRESS	15787 331 SOUTH
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/02/07-80005-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LEE PINCKARD*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/07

Date

850/835-4500

Daytime Phone #