

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 221688

1. Entity Name

VAN HORN TRANSFER AND STORAGE COMPANY

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90129 028 ***150.00

Principal Place of Business	Mailing Address
1421 HARRISON AVE PANAMA CITY FL 32401	1421 HARRISON AVE PO BOX 845 2032 HWY 2297 32402-0845

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	59-0870306	Applied For
		Not Applicable

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
HERCULES, PETTIS L. 1421 HARRISON AVE. PANAMA CITY FL 32401

7. Name and Address of New Registered Agent		
Name		
Street Address (P.O. Box Number is Not Acceptable)		
City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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, 2000 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	PD	☐ Delete
NAME	PETTIS, HERCULES L.	
STREET ADDRESS	2509 W 9TH ST	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	T	☐ Delete
NAME	WEST, TINA	
STREET ADDRESS	2300 SHERMAN AVE	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	V	☐ Delete
NAME	DAUNGBUTE, SURAPHUNT	
STREET ADDRESS	2540 COCOA AVE	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	S	☐ Delete
NAME	PETTIS, STEPHANIE A	
STREET ADDRESS	6606 S LAGOON DR	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ 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: *Hercules Pettis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HERCULES L PETTIS

Date

4/18/00 850-763-3965

Daytime Phone #

CR2E034 (9/99)