## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment

SIGNATURE:

## Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # 221688** 1. Entity Name VAN HORN TRANSFER AND STORAGE COMPANY 04-30-2001 90350 014 \*\*\*150.00 Mailing Address Principal Place of Business 1421 HARRISON AVE 1421 HARRISON AVE PANAMA CITY FL 32401 PO BOX 845 2032 HWY 2297 32402 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-0870306 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HERCULES, PETTIS L. Street Address (P.O. Box Number is Not Acceptable) 1421 HARRISON AVE. PANAMA CITY FL 32401 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME PETTIS, HERCULES L. NAME STREET ADDRESS STREET ADDRESS 2509 W 9TH ST CITY-ST-ZIP CITY-ST-7IP PANAMA CITY FL 32401 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME WEST, TINA NAME STREET ADDRESS STREET ADDRESS 2300 SHERMAN AVE CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32405 Change ☐ Addition TITLE TITLE ☐ Delete DAUNGBUTE, SURAPHUNT NAME NAME STREET ADDRESS 2540 COCOA AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Addition Change Delete TITLE TITLE PETTIS, STEPHANIE A NAME NAME STREET ADDRESS .6606 S LAGOON DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32407 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BUSINESS AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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