

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 845143 (7)

1. Corporation Name
TRANSPORT REALTY OF ARKANSAS, INC.



Principal Place of Business 3801 OLD GREENWOOD RD. FORT SMITH AR 72903 US	Mailing Address P.O. BOX 10048 FORT SMITH AR 72917-0048 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/04/1980	
2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30
4. FEI Number 71-0349248	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MYERS, EDWARD	1.2 NAME	
STREET ADDRESS	3801 OLD GREENWOOD RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. SMITH AR 72903	1.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOEFFLER, DAVID E	2.2 NAME	
STREET ADDRESS	3801 OLD GREENWOOD RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. SMITH AR 72903	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ECHOLS, WALTER	3.2 NAME	
STREET ADDRESS	3801 OLD GREENWOOD RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. SMITH AR 72903	3.4 CITY-ST-ZIP	
TITLE	CU <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNG, ROBERT A	4.2 NAME	
STREET ADDRESS	3801 OLD GREENWOOD RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. SMITH AR 72903	4.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCAFFREY, SHAUN M	5.2 NAME	
STREET ADDRESS	3801 OLD GREENWOOD RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. SMITH AR	5.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STUBBLEFIELD, DAVID E	6.2 NAME	
STREET ADDRESS	3801 OLD GREENWOOD RD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	FT. SMITH AR 72903	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sandra B. Mortham, Asst. Treasurer* 4/9/98

CR2E034 (10/97)