

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90350 010 ***150.00

DOCUMENT # F94000001429 1. Entity Name ABCO TRANSPORTATION, INC.					
Principal Place of Business 20537 US HWY 301 NORTH DADE CITY, FL 33523 US			Mailing Address 20537 US HWY 301 NORTH DADE CITY, FL 33523 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03192004 Chg-P CR2E034 (10/03)	
4. FEI Number 59-3206435				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ABERNATHY, NORMA 6226 PENNA STREET BROOKSVILLE, FL 34609			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>Ivan Abernathy</i> Signature, typed or printed name of registered agent and title if applicable.			DATE: <u>3/26/04</u> (NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ABERNATHY, LESTER G 6226 PENNA STREET SPRINGHILL, FL 34609 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Ivan Abernathy 20537 US Hwy 301 N Dade City, FL 33523 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ABERNATHY, NORMA J 6226 PENNA STREET SPRINGHILL, FL 34609 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer Ivan Abernathy 20537 US Hwy 301 N Dade City, FL 33523 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Norma Abernathy 20537 US Hwy 301 N Dade City, FL 33523 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Ken McLinn 20537 US Hwy 301 N Dade City, FL 33523 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Ivan Abernathy</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE: <u>03/26/04</u> <u>352-583-5243</u> Date Overtime Phone #		