

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001429

FILED  
Feb 15, 2010  
Secretary of State

Entity Name: ABCO TRANSPORTATION, INC.

## Current Principal Place of Business:

20537 US HWY 301 NORTH  
DADE CITY, FL 33523 US

## New Principal Place of Business:

## Current Mailing Address:

20537 US HWY 301 NORTH  
DADE CITY, FL 33523 US

## New Mailing Address:

FEI Number: 59-3206435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO  
Name: ROBERTS, RALPH L SR  
Address: 600 GILLAM ROAD  
City-St-Zip: WILMINGTON, OH 45177

Title: SEC  
Name: DELUCA, DONALD  
Address: 7290 COLLEGE PKWY, SUITE 400  
City-St-Zip: FT. MYERS, FL 33907

Title: ASST  
Name: WADE, JEFFREY C  
Address: 600 GILLAM ROAD  
City-St-Zip: WILMINGTON, OH 45177

Title: V.P.  
Name: ROBERTS, RALPH L JR  
Address: 600 GILLAM ROAD  
City-St-Zip: WILMINGTON, OH 45177

Title: V.P.  
Name: ROBERTS, ROBY  
Address: 600 GILLAM ROAD  
City-St-Zip: WILMINGTON, OH 45177

Title: V.P.  
Name: BOWMAN, ROB  
Address: 15971 MCGREGOR BLVD  
City-St-Zip: FT. MYERS, FL 33908

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY C WADE

ASST

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date