FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT #

161

1. Corporation	RANSIT MANAGEMENT ((-)							
Principal Place of Business Ma		Mailing Address	Vailing Address					i Dibil Dibil bibil	
100 N. MYRT Jacksonvil	'LE AVE. LE FL 32204-1310	100 N. MYRTLE AVE. JACKSONVILLE FL 32204-1310							
						 Date Incorporated or Qualified 12/11/1990 	3a.	Date of Last F 03/29/19	
	ace of Business	2a. Mailing Address				4. FEI Number 59-3041602		· · · · · ·	Applied For
Suite, Apt.	# oto	26 Suite Apt # ete	Suite, Apt. #, etc.			39'304 1002			Not Applicable
22		27				5. Certificate of Status Desired	ED	4	Additional Required
City & State)	City & State		 -		6. Election Campaign Financing		· · · · · · · · · · · · · · · · · · ·	0 May Be
23		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip	Country		1	8. This corporation has liability for in	ntangit le	a tax under s.	199.032,
24	25 25 Alama and Address of Ov	29	30				Yes		
	9. Name and Address of Cu	rrent Registered Agent	81	Name	1	0. Name and Address of New R	egistere	d Agent	
1.401110	ADA OINDV A		61	name					
	ARA, CINDY A		82	82 Street Ad-		P.O. Box Number is Not Acceptable	e)		
330 BARNETT CNETER 50 NORTH LAURA ST.			83						
	NVILLE FL 32201		L.	<u>-</u>					
UNDITO	MAILLE I E OFFO!		84	City			t:	85 Zip	Code
or register familiar wit	ed agent, or both, in the State of f	Florida. Such change was authorize Section 617.0503, Florida Statutes.	d by the corp	oration's	board of	submits this statement for the purp directors. Thereby accept the appo	intmer t	as registered	agent. I am
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFE	CERS.A	ND DIRECTOR	RS IN 12
THILE	DP	☐ DELETE	1.1 TITLE		D/	Þ		R Change	Addition
NAME	STOVER, LARRY		1.2 NAME		"	-			
STREET ADDRESS	100 N. MYRTLE ST.		1.3 STREET						
CITY-ST-ZIP TITLE	JACKSONVILLE FL DV	DELETE	1.4 C(TY - ST - Z(P) 2.1 T(TLE		- <u>-</u> -			Change	Addition
NAME	JURY, THOMAS	L. Decere	2.2 NAME		D/V			change	□ Addition
STREET ADDRESS	100 N. MYRTLE ST.		2.3 STREET ADDRESS						
CITY-ST-ZIP	JACKSONVILLE FL	i er er		2. 4 CITY - S1 - ZIP					
TITLE	DPT	DELETE	3.1 TITLE		D.	/s/T		Change	Addition
NAME	O'LEARY, ROBERT		3.2 NAME		-				
STREET ADDRESS	100 N. MYRTLE ST.		3.3 STREET	ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL	Parieze	3.4. CITY - 5	ST-ZIP				. <u></u>	
TITLE		DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S 5.1 TITLE	T-ZIP	 			Change	Addition
NAME		عاددات	52 NAME						- 100-1011
STREET ADDRESS			53 STREET	ADDRESS					
CITY-ST-ZIP			5.4 City - S	J					
TITLE		DELETE	61 TITLE					Change	☐ Addition
NAME			62 NAME						
STREET ADDRESS			63 STREET	ADDRESS					
CITY-ST-ZIP			64 CITY - S		L				
certify that	the information indicated on this a	annual report o r supplementál annua	al report is tru	ie and ac	ccúrate an	e exemption stated in Section 119.0 nd that my signature shall have the s out as required by Chapter 617, Flo	same loc	cal effect as if	made under

3-5-96 904-630-3154 Daytore Phone