

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711268

Entity Name: FLORIDA TRUCKING ASSOCIATION, INC.**Current Principal Place of Business:**350 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301**Current Mailing Address:**350 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301**FEI Number:** 59-0248607**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARMSTRONG, KENNETH S. PHD
350 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301 US*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:** KENNETH S. ARMSTRONG, PH. D

03/18/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MCTYRE, JOHN
Address PO BOX 590147
City-State-Zip: ORLANDO FL 32859

Title TREASURER
Name BORGLUND, TERRY
Address 3939 HIGHWAY 98 S
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name SANDLIN, ROBERT
Address 200 W. FORSYTH STREET
7TH FLOOR
City-State-Zip: JACKSONVILLE FL 32202

Title CHAIR-ELECT
Name DAY, JEFF
Address PO BOX 32024
City-State-Zip: LAKELAND FL 33802

Title CHAIRMAN
Name ROSS, DENIS
Address 833 PICKETTVILLE ROAD
City-State-Zip: JACKSONVILLE FL 32220

Title PRESIDENT & CEO
Name ARMSTRONG, KENNETH S. PHD
Address 350 E. COLLEGE AVENUE
City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY
Name CURRLIN, CARLOS
Address 7227 NW 74TH AVENUE
City-State-Zip: MIAMI FL 33166

Title DIRECTOR
Name EMRICH, CHRIS
Address 12315 COUNTY ROAD 579
City-State-Zip: THONOTOSASSA FL 33592

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KENNETH S. ARMSTRONG

PRESIDENT & CEO

03/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HYDER, DOC
Address 41124 MESSICK ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name FRITTS, JARED
Address 13410 SUTTON PARK DRIVE S
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name WALPOLE, KEITH
Address PO BOX 1177
City-State-Zip: OKEECHOBEE FL 34973

Title DIRECTOR
Name SHALLAR, MARC
Address 4231 BRITT ROAD
City-State-Zip: MOUNT DORA FL 32757

Title DIRECTOR
Name PRITCHETT, PHILLIP
Address PO BOX 311
City-State-Zip: LAKE BUTLER FL 32054

Title DIRECTOR
Name PERRY, SCOTT
Address 11690 NW 105 STREET
City-State-Zip: MIAMI FL 33178

Title DIRECTOR
Name DUSHARM, JARED
Address PO BOX 678
City-State-Zip: PALM CITY FL 34991

Title DIRECTOR
Name MARPLE, JEFF
Address 5223 16TH AVENUE S
City-State-Zip: TAMPA FL 33619

Title DIRECTOR
Name VEST, KURT
Address 2924 HARBOR GRACE COURT
City-State-Zip: APOPKA FL 32703

Title DIRECTOR
Name ACUFF, PHARES
Address 8139 HIGHWAY 33 N
City-State-Zip: LAKE LAND FL 33809

Title DIRECTOR
Name CARRYL, ROB
Address PO BOX 6833
City-State-Zip: JACKSONVILLE FL 32236

Title DIRECTOR
Name DICKS, TERRY
Address 4458 S. US HIGHWAY 441
City-State-Zip: LAKE CITY FL 32025