

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J22199

**Entity Name:** CENTURION AUTO TRANSPORT, INC.**Current Principal Place of Business:**5912 NEW KINGS ROAD  
JACKSONVILLE, FL 32209**Current Mailing Address:**5912 NEW KINGS ROAD  
JACKSONVILLE, FL 32209 US**FEI Number:** 59-2708755**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH HULSEY & BUSEY, P.A.  
225 WATER STREET  
SUITE 1800  
JACKSONVILLE, FL 32202 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:** DAVID J. HULL

01/16/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** DIRECTOR, CHAIRMAN, SECRETARY**Name** SHAFER, VICKI**Address** 5912 NEW KINGS ROAD**City-State-Zip:** JACKSONVILLE FL 32209**Title** VC**Name** MCGARITY, CHARLES**Address** 5912 NEW KINGS ROAD**City-State-Zip:** JACKSONVILLE FL 32209**Title** SENIOR VICE PRESIDENT**Name** MCKINNEY, JACK**Address** 5912 NEW KINGS ROAD**City-State-Zip:** JACKSONVILLE FL 32209**Title** PRESIDENT, CEO**Name** INGRAM, RICK S, JR**Address** 5912 NEW KINGS ROAD**City-State-Zip:** JACKSONVILLE FL 32209**Title** COO**Name** PEARSON, DEAN**Address** 5912 NEW KINGS ROAD**City-State-Zip:** JACKSONVILLE FL 32209

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:** VICKI SHAFER

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01/16/2015

Electronic Signature of Signing Officer/Director Detail

Date