

2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P17000036643

Entity Name: BLACKMAN TRANSPORT, INC.**Current Principal Place of Business:**15515 HWY 301 N
DADE CITY, FL 33523**Current Mailing Address:**15515 US HWY 301
DADE CITY, FL 33523 US**FEI Number: 82-1214948****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLACKMAN, DALE
15515 HWY 301 N
DADE CITY, FL 33523 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P, D	Title	DIRECTOR OF OPERATIONS
Name	BLACKMAN, DALE	Name	CREECH, ERIC
Address	15515 US HWY 301	Address	15515 US HWY 301
City-State-Zip:	DADE CITY FL 33523	City-State-Zip:	DADE CITY FL 33523
Title	DIRECTOR OF FLEET	Title	TREASURER
Name	FIELDS, WILLIAM	Name	MARTINEZ, MERIEL
Address	15515 US HWY 301	Address	15515 US HWY 301
City-State-Zip:	DADE CITY FL 33523	City-State-Zip:	DADE CITY FL 33523
Title	DIRECTOR OF SAFETY & RECRUITING		
Name	HILL, BOBBY		
Address	15515 US HWY 301		
City-State-Zip:	DADE CITY FL 33523		

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: DALE BLACKMAN**PRESIDENT****06/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date