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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90051 038 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 173093

1. Corporation Name
TERMINAL SERVICE COMPANY

Principal Place of Business

122 APPELYARD DRIVE
P.O. BOX 1200
TALLAHASSEE FL 32302

Mailing Address

122 APPELYARD DRIVE
P.O. BOX 1200
TALLAHASSEE FL 32302

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/07/1953

4. FEI Number

59-0752755

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

LANDRUM, ROBERT G JR
1917 WILLOW RUN
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD
NAME AUDIE, JOSEPH J JR
STREET ADDRESS 705 S RIDE
CITY-ST-ZIP TALLAHASSEE FL. ☐ DELETE

TITLE D
NAME SHAEFFER, JAMES C
STREET ADDRESS 122 APPELYARD DRIVE
CITY-ST-ZIP TALLAHASSEE FL. ☐ DELETE

TITLE T
NAME CROSS, ANN
STREET ADDRESS 122 APPELYARD DR
CITY-ST-ZIP TALLAHASSEE FL. ☒ DELETE

TITLE P
NAME LANDRUM, ROBERT G JR
STREET ADDRESS 1917 WILLOW RUN
CITY-ST-ZIP TALLAHASSEE FL. ☐ DELETE

TITLE S
NAME FOWLER, DANA
STREET ADDRESS 122 APPELYARD DR.
CITY-ST-ZIP TALLAHASSEE FL. ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TS
1.2 NAME Dana Dudley
1.3 STREET ADDRESS 122 Appleyard Dr
1.4 CITY-ST-ZIP Tallahassee FL 32302 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CEO

4/21/99

Date

850-576-1221

Daytime Phone #

CR2E034 (11/98)