

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90438 024 ***150.00

DOCUMENT # 274772

1. Entity Name

TAYLOR DIESEL SERVICE, INC.



Principal Place of Business

228 NORTH MYRTLE AVE
JACKSONVILLE FL 32204

Mailing Address

228 NORTH MYRTLE AVE
JACKSONVILLE FL 32204

2. Principal Place of Business

400 North Myrtle Ave

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 6853

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

Jacksonville, FL

City & State

Jacksonville FL

4. FEI Number

59-1027522

Applied For

Not Applicable

Zip

32202

Country

Zip

32236

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, EDWARD I., JR.
3146 OLD PORT CRCL.
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME TAYLOR, EDWARD I JR
STREET ADDRESS 228 N MYRTLE AVE
CITY-ST-ZIP JACKSONVILLE, FL 00000 32204

TITLE VPST ☐ Delete
NAME HOHMANN, COURTNEY
STREET ADDRESS 228 N MYRTLE AVE
CITY-ST-ZIP JACKSONVILLE, FL 00000 32204

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Taylor, Edward I Jr.
STREET ADDRESS P.O. Box 6853
CITY-ST-ZIP Jacksonville, FL 32236

TITLE VPST ☒ Change ☐ Addition
NAME Hohmann, Courtney
STREET ADDRESS P.O. Box 6853
CITY-ST-ZIP Jacksonville, FL 32236

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:

Edward I Taylor Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-04

356-2641

Date

Daytime Phone #