FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 312238

(9)

D & K TRANSPORT, INC.

FILED	
Apr 21 1997 8:00am	1
Secretary of State	



r incipai r iaci	e or positiess		เพลแกรู	J Address								*			
15515 US 301 DADE CITY FL 33525 US				P.O. BOX 186 DADE CITY FL 33526-0186 US											
								3		Date Incorporated or Qualified 12/22/1966		ate of L		oport	
	lace of Business	2a. Ma	iling Address				4	4.	FEI Number	· · · · · · · · · · · · · · · · · · ·	T	Ap	plied For		
21				26						59-1202794			No	t Applicable	
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.					5. Certificate of Status Desired X \$8.75 Addition							
City & State				City & State								F	e Re	quired	
	ŧ		— ·	/ & State				6		Election Campaign Financing	F-7			May Be	
23 Zip	Country			Zip Country					Trust Fund Contribution						
								8	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes No						
<u> </u>	9, Name and Add	ress of Current	29 Registere	d Agent	30					Florida Statutes Name and Address of New Re	 	No			
18/41	LLER, CHARLES D.		1103101010			81	Name		V	Manie and Adoless Of Hely No	Alete en	Agent			
	27 LIVE OAK AVE														
						82	Street	Address	(P.0	O. Box Number is Not Acceptat	ole)				
UAL	DE CITY FL 33525					83	 				· · · · · · · · · · · · · · · · · · ·				
						"									
						84	City				p-,	85	Zip (Code	
46 Digginant	to the provinces of Co	-1: 607.0500		(00 Fig. 1-1 01-1		L	<u> </u>				FL	11			
office or re agent. I as	egistered agent, or bo m familiar with, and ac	oth, in the State occupt the obligat	forida. Sions of, Sei	oue, Florida State luch change was ction 607.0505, F	nes, me ar authorize florida Stat	oov d by lute:	e-named y the corp s.	corporati coration's	tion s bo	submits this statement for the poard of directors. I hereby acce	ourpose o	t chang oointme	ing its nt as i	s registered registered	
SIGNATURE	Signature, typed or printed ria				DIL Registere						DATE				
12.		OFFICERS AND	DIRECTOR		13.				ΑC	DDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	TORS	S IN 12	
TITLE	PD			☐ DELETE	1.1 10	TL E						Chá	inge	Addition	
NAME	SURRATT, BILL A	A. J			1.2 NA	ME									
STREET ADDRESS	1 55 15 US 301				1.3 \$1	REET	ADDRESS								
CITY-ST-ZIP	DADE CITY FL				1.4 Cf	TY-S	ST-ZIP								
TITLE	ST			☐ DELETE	2.1 7(TLE						Cha	inge	☐ Addition	
NAME	LINDSAY, KENNE	TH W.,JR			2.2 NA	ME									
STREET ADDRESS	15515 US 301				2.3 S1	REET	ADDRESS								
CITY-ST-ZIP	DADE CITY FL				2. 4 C	ITY - S	ST-ZIP								
TITLE	D			DELETE	3.1 10	ΙLΕ						Cha	inge	Addition	
NAME	LINDSAY, KENNE	TH W.,JR			3.2 NA	ME									
STREET ADDRESS	15515 US 301				3.3 S1	REET	ADDRESS								
CITY-ST-ZIP	DADE CITY FL				3.4. CI	<u> </u>	ST - ZIP								
TITLE	ASD			DELETE	4.1 111	LE						Cha	nge	Addition	
NAME	SURRATT, ANITA	GAIL			4. 2 N	AME									
STREET ADDRESS	15515 US 301				4.3 ST	REET	ADDRESS								
CITY-ST-ZIP	DADE CITY FL				4.4 CH	<u> </u>	37 - 2 1P								
TITLE				DELETE	5.1 111	LE						Cha	nge	Addition	
NAME					5.2 NA	ME									
STREET ADDRESS					5.3 ST	REFT	ADDRESS								
CITY-ST-ZIP					5.4 01	TY-8	1-ZIP								
TITLE				DELETE	6.1711	Lŧ						Cha	nge	☐ Addition	
NAME					6.2 NA	Mξ									
STREET ADDRESS					6.3 \$1	REET	ADDRESS								
CITY-ST-ZIP					6.4 CIT										
14. I do hereb	y certify that the inforr	nation supplied	with this fili	ng does not qual	lify for the	OYO	mption st	ated in S	Sect	tion 119.07(3)(i), Florida Statute	s. I further	certify	that t	he	
information	n indicaled on this and	nual report or sup corporation or th	pplemental ne receiver	annual report is or trustee empor	trué and a wered to e	CCL.	irate and	that my s	einr	nature shall have the same lega uired by Chapter 607, Florida S	Laffort ac	hem li	പൊപ	or path: th	