

314339

Annual Report
filed 6-30-70

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2 pgs.

Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

Refer to This Number
in All Correspondence

This return is due
on July 1

RYDER TRUCK LINES INC
2050 KINGS ROAD
JACKSONVILLE FLA 32203

26-08-G-314339
03703/67

EXEMPT

1970

MISCELLANEOUS

(General nature of business)

1. Ryder Truck Lines, Inc.
(Give exact name of corporation)

2. Exempt Public Carrier

3. P. O. Box 2408 Jacksonville Duval Florida
(Street or Post Office Box of principal place of business) (City) (County) (State)

4. a. E. N. Hoekenga President Jacksonville, Florida
(Officers-Name) (Title) (Address)

b. W. H. Ovard Vice President & Treasurer Jacksonville, Florida
c. Peter Keber Secretary Philadelphia, Pa.
d. W. D. Beatenbough Executive Vice President Jacksonville, Florida
A. Lentz Controller & Ass't. Secretary Jacksonville, Florida

5. a. E. N. Hoekenga Jacksonville, Florida
(Directors - Max. 6) (Law requires at least (3) three) (Address)

b. W. D. Beatenbough Philadelphia, Pa.
c. J. G. Rubenstein Philadelphia, Pa.
d. Alden S. Bennett Philadelphia, Pa.
Peter Keber

6. _____
(Resident Agent Name) (Address)

7. Last meeting of Directors 4-14-70 8. Corporation Active? YES 9. If inactive,
(Month - Day - Year) (Yes or No) activity began (Month - Day - Year)

10. If inactive, will corporation 11. Date incorporated 3-3-67 12. If foreign corporation,
begin business in the future? (Yes or No) (Month - Day - Year) Date Qualified in Fla. (Month - Day - Year)

13. Total Authorized Capital Stock:

<u>100</u>	\$ <u>100.00</u>
(No. of shares with par value)	(Par value each)
_____	\$ _____
(No. of shares with par value)	(Par value each)
_____	\$ _____
(No. of shares without par or nominal value)	(Total dollar value)

14. Outstanding Capital Stock: (Issued)

(a) <u>97</u>	\$ <u>100.00</u>	\$ <u>9,700.00</u>
(No. of shares with par value)	(Par value each)	(Total dollar value)
(b) _____	\$ _____	\$ _____
(No. of shares with par value)	(Par value each)	(Total dollar value)
(c) _____	\$ _____	\$ _____
(No. of shares without par or nominal value)	(Total dollar value)	(Total dollar value)
(d) Total (a) + (b) + (c)	\$ _____	\$ <u>9,700.00</u>

15. Amount of tax Due \$ NONE

16. Less Credit Memo if any \$ EXEMPT

17. Penalty and Interest (see instructions) \$ PUBLIC CARRIER

18. Amount of tax remitted with this return \$ _____

19. If foreign corporation, give amount of capital employed in Florida. \$ _____

20. If foreign corporation, give the number of States in which you do business. _____

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

By W. H. Ovard
Vice President

STATE OF FLORIDA
COUNTY OF DUVAL

Attest: A. Lentz
ASS'T. Secretary

Personally appeared before me W. H. Ovard and A. Lentz
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 30th day of June 19 70.
Notary Public, State of Florida at Large
(Notary Seal) Signature of Notary taking acknowledgment

FORM DR-108

Send Original with remittance to THE DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA
Send First copy to The Department of State, Tallahassee, Florida

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL