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FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 374632 (8)
1. Corporation Name
MASON TRUCKING CO.



Principal Place of Business Mailing Address
HIGHWAY 44 WEST HIGHWAY 44 WEST
P.O. BOX 1236 P.O. BOX 1236
EUSTIS FL 32726 EUSTIS FL 32726

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 1990 Co Rd 44

Suite, Apt. #, etc.

22 Eustis FL

City & State

23 32726 Lake

Zip Country

24 25

2a. Mailing Address

26 P. O. Box 1236

Suite, Apt. #, etc.

27 Eustis FL

City & State

28 32727 Lake

Zip Country

29 30

3. Date Incorporated or Qualified

12/28/1970

4. FEI Number

59-1309886

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NORRIS, GAIL L.
2008 COUNTRY CLUB DR.
EUSTIS FL 32726

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD
NAME NORRIS, CHARLES E., II
STREET ADDRESS HWY 46 A
CITY-ST-ZIP EUSTIS FL

☐ DELETE

TITLE PDT
NAME NORRIS, GAIL L.
STREET ADDRESS 2008 COUNTRY CLUB DRIVE
CITY-ST-ZIP EUSTIS FL

☐ DELETE

TITLE SD
NAME NORRIS, ROBERT E.
STREET ADDRESS 429 PALM AVE.
CITY-ST-ZIP EUSTIS FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ 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.

Gail L. Norris

4-29-98

352-357-8000

CR2E034 (10/97)