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May 06 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 # 404337 (8)

1. Corporation Name  
TREDWAY'S MOVING & STORAGE, INC.



Principal Place of Business  
P.O. BOX 9550  
1640 MASON AVE  
DAYTONA BEACH FL 32120

Mailing Address  
P.O. BOX 9550  
1640 MASON AVE  
DAYTONA BEACH FL 32120

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/05/1972	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1402966	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HAMLIN, KENDALL W. 1640 MASON AVE. DAYTONA BEACH FL 32120		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	TOZIER, AIDEN W JR	1.2 NAME	KENDALL W. HAMLIN
STREET ADDRESS	1640 MASON AVENUE	1.3 STREET ADDRESS	1640 MASON AVE
CITY - ST - ZIP	DAYTONA BCH FL	1.4 CITY - ST - ZIP	DAYTONA BEACH, FL
TITLE	D	2.1 TITLE	
NAME	SEIBERT, STEVE	2.2 NAME	
STREET ADDRESS	1640 MASON AVENUE	2.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	
NAME	SINGLETARY, C W	3.2 NAME	
STREET ADDRESS	1640 MASON AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL	3.4 CITY - ST - ZIP	
TITLE	VP	4.1 TITLE	
NAME	BARNES, DAVID	4.2 NAME	
STREET ADDRESS	1640 MASON AVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL	4.4 CITY - ST - ZIP	
TITLE	ST	5.1 TITLE	
NAME	MITCHELL, PEGGY	5.2 NAME	
STREET ADDRESS	1640 MASON AVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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.

*Peggy M. Mitchell*

CP2E034 (10/97)