

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 434708

1. Entity Name

FLORIDA TRANSPORT CORPORATION

Principal Place of Business

100 RIALTO PLACE, STE 500
MELBOURNE FL 32901

Mailing Address

100 RIALTO PLACE, STE 500
MELBOURNE FL 32901

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

SOTTILE, JOHN H
100 RIALTO PLACE, STE 500
MELBOURNE FL 32901

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE CPD ☐ Delete
NAME SOTTILE, JOHN H
STREET ADDRESS 2324 BROOKSIDE WAY
CITY-ST-ZIP INDIANLANTIC FL

TITLE SD ☐ Delete
NAME SEVERS, DWIGHT W
STREET ADDRESS 770 N CARPENTER ROAD
CITY-ST-ZIP TITUSVILLE FL

TITLE TAS ☐ Delete
NAME WHERRY, STEPHEN R.
STREET ADDRESS 3916 PEACOCK DRIVE
CITY-ST-ZIP MELBOURNE FL

TITLE D ☐ Delete
NAME FAZZINI, JOHN P
STREET ADDRESS 101 EAST STUART AVENUE
CITY-ST-ZIP LAKE WALES FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE AS ☐ Change ☒ Addition
NAME STRANGE, PATRICIA A
STREET ADDRESS 100 RIALTO PL., STE. 500
CITY-ST-ZIP MELBOURNE, FL 32901

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

By: Florida Transport Corporation

SIGNATURE:

STEPHEN R. WHERRY

4/10/01

Date

(321) 724-1700

Daytime Phone #



DO NOT WRITE IN THIS SPACE

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