02151999-90030-026-\$150.00-\$150.00

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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Feb 15, 1999 8:00 am Secretary of State

02-15-1999 90030 026 \*\*\*150.00

	1999								
1. Corporațio			1 - 7, 1 - 7, 2 - 7 - 1	, 		s. 			
CUUPE	R TRANSPORTATION, INC.				•		nn 1484 Alba Braix Gill A	nais minis mass nas	
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	ce of Business	Mailing Address				,	•		
101 SOUTH MAIN STREET BROOKSVILLE FL 34601-3336		101 SOUTH MAIN STREET BROOKSVILLE FL 34601-333	BROOKSVILE FL 34601-3336						
DIOONSTILL	. 12 34001 5000		•				TE IN THIS SPACE		_
						3. Date incorporated or Qualifed		•	
						02/03/1978			_
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	H	Applied For Not Applicable	
21	-	Suite, Apt. #, etc.				63-0754871	\$9.7	5 Additional	٠ :
Suite, Apt	. #, etc.	27 Suite, Apr. #, etc.		· ·		-5 Certificate: of Status Desired -		Required	~ ~~
City & Sta	te	City & State				8. Election Campaign Financing	_ \$5.0	00 May Be	7
23		28			ĺ	Trust Fund Contribution		led to Fees	
Zip	Country	Zip	Con	ntry		8. This corporation owes the curr	ent year Intangible		_]_
24	25	29	30			Personal Property Tax.	☐Yes	□Ño	
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New I	Registered Agent	<del></del>	-
	OOL LOOPPILE IS		ļ	81 N	ame			٠.	
MASON, JOSEPH M JR				82 Street Addres		ss (P.O. Box Number is Not Accepts	ible)		7
	SOUTH MAIN STREET		. }						<del>.</del>
BM	DOKSVILLE FL 34605-8900	·	1	83		र पुरित्या । प्रदेशपूर्व नेही सीविहें हैं के कम प्राप्त सम्बद्धाना है सम्बद्धाना है			<u>!</u>  -
				84 C	ity		85 2	Zip Code	٦
<u>, , , , , , , , , , , , , , , , , , , </u>	· Cr.						FL	in analotored	_
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	of Florida, Such change was aut	s, the at thorized	by the	corporation	ration submits this statement for the tis board of directors. I hereby accep	of the appointment a	s registered	
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.0505, Florid	da Statu	iles.			•		
SIGNATURE	Signature, lyped or printed name of registered age	nt and little if accelerable. (NOTE: F	Cacilstared a	Agent sign	esture required w	when reinstating)	DATE		=
12.		ND DIRECTORS	13.	<del></del>		ADDITIONS/CHANGES TO OF	FICERS AND DIREC		<b>⊒</b> 👸
TITLE	PT	☐ DELETE	1.1 111	LE .		Control of the second	☐ Chan	nge 🔲 Additio	»  E
NAME	DOVE, G. MACK		1.2 NA	12 NAME		•	_	•	8
STREET ADDRESS	s 1751 KINSEY RAOD		1.3 STI	REET ADD	RESS	•			
CITY-ST-ZIP	DOTHAN AL	<u> </u>	14 CIT	TY-ST-ZIP	·				ΙЩ
TITLE	VPS	C							- RZE(
NAME	COGGINS, CHARLES E.	☐ DELETE	2.1 गा	UE .			[] Chan	nge Addhlio	9   8       CR2E034 (11/98)
STREET ADDRESS	AREA MINIOPS/ DOAD	Detere		WE		متحدد مساده بن ساد م	[] Chan	nge	cR2E
SINCE ADDRESS	1751 KINSEY RRAD	DELETE	22 NA		RESS		Chan	nge Addrife	CR2E
CITY-ST-ZIP	DOTHAN AL		22 NA 23 STI 2.4 CT	ME REET ADD TY-ST-ZIP					
	DOTHAN AL	DELETE	22 NA 23 STI 2.4 CF 3.1 TIT	ME TEET ADD TY-ST-ZIP LE			Chan		
CITY-ST-ZIP	DOTHAN AL AS . BARKLEY, JAMES E.		2.2 NA 2.3 STF 2.4 CF 3.1 TITS 3.2 NA	ME REET ADD TY-ST-ZIP LE ME	,				
CITY-ST-ZIP	DOTHAN AL AS BARKLEY, JAMES E. 1751, KINSEY ROAD		2.2 NA 2.3 STF 2.4 CF 3.1 TITS 3.2 NA	ME TEET ADD TY-ST-ZIP LE	,				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DOTHAN AL AS . BARKLEY, JAMES E.	☐ DELETE	22 NAI 23 STF 2.4 CF 3.1 TFF 3.2 NAI 3.3 STF 3.4. CFF	ME REET ADD TY-ST-ZIP LE ME REET ADO TY-ST-ZIP	RESS		☐ Chan	rge Additio	οπ
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DOTHAN AL AS BARKLEY, JAMES E. 1751, KINSEY, ROAD DOTHAN AL	☐ DELETE	22 NAI 23 STI 2.4 CF 3.1 TITE 3.2 NAI 3.3 STE 3.4 CF 4.1 TITE 4.2 NAI	ME TY-ST-ZIP LE ME REET ACCO TY-ST-ZIP LY-ST-ZIP LY-ST-ZIP LY-ST-ZIP	RESS		☐ Chan	rge Additio	οπ
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14. I hereby certify that the information supplied with his 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 thet my signature shall have the same legal effect as if made under ceth; 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 entactynept with an address, with all other like empowered.

SIGNATURE:

Vice President-Administration

And Finance

3-29-99 334-793-2284