FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 29, 2001 8:00 am Secretary of State **DOCUMENT # 577472** JOHN J. JERUE TRUCK BROKER, INC. 01-29-2001 90131 025 ***150.00 Principal Place of Business Mailing Address 125 N WILSON AVE PO BOX 9007 BARTOW FL 33830 BARTOW FL 33830 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1858040 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MANN, JOHN L Street Address (P.O. Box Number is Not Acceptable) 105 S FLORIDA AVE LAKELAND FL 33801 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change TITLE ☐ Delete PD TITLE ☐ Addition NAME JERUE, JOHN J. NAME 125 N WILSON AVE STREET ADDRESS STREET ADDRESS 195 N. RIFLE RANGE ROAD CITY-ST-ZIP CITY-ST-ZIP BARTOW, FL 33830 BARTOW FL TITLE Delete ☐ Change AS ☐ Addition NAME NAME JERUE, LAURIE STREET ADDRESS STREET ADDRESS 195 N RIFLE RANGE RD CITY-ST-ZIP CITY-ST-ZIP BARTOW FL TITLE بالا د مختلاف سعيد بيبرد يا ي ☐ Addition Delete | Change NAME. JERUE, J. JEFF NAME 125 N WILSON AVENUE STREET ADDRESS STREET ADDRESS 195 N RIFLE RANGE RD BARTOW, FL CITY-ST-ZIP CITY-ST-ZIP 33830 BARTOW FL TITLE ☐ Delete SVD TITLE S/VD Change ☐ Addition NAME NAME CAMPANO, EUSEBIO L. 125 N WILSON AVE STREET ADDRESS STREET ADDRESS 195 N. RIFLE RANGE RD. CITY-ST-ZIP CITY-ST-7IP BARTOW, FL 33830 BARTOW FL TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-00 (563

(863) 519-5678 Bet. 208

Daytime Phone