2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 639866 Apr 20, 2000 8:00 am Secretary of State WATKINS TRANSPORTATION SERVICE, INC. 04-20-2000 90102 031 ***150.00 Principal Place of Business Mailing Address PO BOX 1738 1958 NE MONROE DR ATLANTA GA 30324 ATLANTA GA 30301-1738 HS HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 58-1401761 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WATKINS, JOHN Street Address (P.O. Box Number is Not Acceptable) 1120 WEST GRIFFIN ROAD LAKELAND FL 33802 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ; Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Delete TITLE NAME NAME READY, GEORGE W JR. STREET ADDRESS STREET ADDRESS 1958 MONROE DR. NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA CHAIRMAN & DIRECTOR XX Change ☐ Addition PD ☐ Delete TIRE NAME WATKINS, JOHN F NAME STREET ADDRESS 1144 WEST GRIFFIN RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33802 Delete TITLE Change ☐ Addition TITLE NAME FREEMAN, WILLIAM A NAME STREET ADDRESS 1958 MONROE DRIVE N.E. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30302-4877 ☐ Delete PRESIDENT & DIRECTOR XX Change Addition EVD TITLE TITLE MILLER, JAMES M NAME NAME STREET ADDRESS STREET ADDRESS 1144 WEST GRIFFIN RD CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33804 DIRECTOR [X]X hange ☐ Addition ☐ Detete TITLE CD TITLE NAME WATKINS, W B IV NAME STREET ADDRESS STREET ADDRESS 1144 WEST GRIFFIN RD CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33804 ASSISTANT SECRETARY XX Addition ☐ Change Delete TITLE TITLE WATKINS, MICHAEL L. 1958 MONROE DRIVE N.E. NAME NAME STREET ADDRESS STREET ADDRESS ATLANTA, GA 30324 CITY-ST-ZIP CITY-ST-7IP 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 supplied that 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 of 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.

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. 404-872-3841

SEC./TREAS. 4-13-00

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