

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 642488

(1)

1. Corporation Name

CLEO DANIELS TRUCKING, INC.



Principal Place of Business

219 STATE ROAD 559
WINTER HAVEN FL 33880

Mailing Address

219 STATE ROAD 559
WINTER HAVEN FL 33880

3. Date Incorporated or Qualified
10/22/1979

3a. Date of Last Report
02/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1940202

Applied For
Not Applicable

State, Apt. #, etc.

State, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24

Country

Zip

Country

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DANIELS, RICHARD C
219 STATE ROAD 559
WINTER HAVEN FL 33880

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

(Signature of Agent to be changed or deleted)

(Signature of Registered Agent to be added or changed)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

PD
DANIELS, RICHARD C
219 STATE ROAD 559
WINTER HAVEN FL

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

1. TITLE

S
DANIELS, VERA L.
219 STATE ROAD 559
WINTER HAVEN FL

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

1. TITLE

2. NAME

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4. CITY - ST - ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE

2. 2. NAME

3. 3. STREET ADDRESS

4. 4. CITY - ST - ZIP

5. 5. TITLE

6. 6. NAME

7. 7. STREET ADDRESS

8. 8. CITY - ST - ZIP

9. 9. TITLE

10. 10. NAME

11. 11. STREET ADDRESS

12. 12. CITY - ST - ZIP

13. 13. TITLE

14. 14. NAME

15. 15. STREET ADDRESS

16. 16. CITY - ST - ZIP

17. 17. TITLE

18. 18. NAME

19. 19. STREET ADDRESS

20. 20. CITY - ST - ZIP

21. 21. TITLE

22. 22. NAME

23. 23. STREET ADDRESS

24. 24. CITY - ST - ZIP

25. 25. TITLE

26. 26. NAME

27. 27. STREET ADDRESS

28. 28. CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

Richard C Daniels

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-96

DATE

741 2931755

PHONE NUMBER

CR2E034 (12/95)