FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

(1)

TO 4410000000471014	A145551A14		
TRANSPORTATION	DUIRFACH FO	r Christ.	INC.

Principal Place	e of Business	Mailing Address				THE MINER MINER NINET WINEF MINER NAME INTO
3948 HWY 90 PACE FL 325		3948 HWY 90 PACE FL 32571-8998				
					3. Date Incorporated or Qualified 04/21/1981	3a. Date of Last Report 03/21/1995
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number 59-2365615	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zιp	Country	Zip	Country	;	8. This corporation has liability for inl	
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Curr	ent Registered Agent		I	10. Name and Address of New Re	Jistered Agent
LOWEDY	CIVILID		81	Name		
3948 HW	', GLYN, JR		82	Street	Address (P.O. Box Number is Not Acceptable	
PACE FL			83			
77.02 72	. OLOT I					
11 Durament	to the analysis of O. J		84	,		FL 85 Zip Code
OI TOGISTEI	ed agent, or both, in the state of Fit	znua. Such change was authoriz	ed by the com	named co oration's	proparation submits this statement for the purpo board of directors. I hereby accept the appoin	ose of changing its registered office of the second changing its registered agent. Lam
rai i iii aa VVII	th, and accept the obligations of, Se	ection 617.0503, Florida Statutes	6.		,	
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if applicable. (NO	Mr. Begistered Age	it signaturo r	equired when reinstating?	DATE
12.		ND DIRECTORS	13.	- signitial or	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	VD	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	STEWART, A. M.		1.2 NAME			
STREET ADDRESS	3948 HWY 90		1.3 STREET	ADDRESS		
CITY-ST-ZIP	PACE FL STD	Moduers.	1.4 CITY - 9	I - ZIP		
TITLE NAME	DYESS, JAMES D.	(X) D€LETE	2.1 TITLE		STD	Change X Addition
STREET ADDRESS	3948 HWY 90		2.2 NAME	********	WARRICK, DANNY F.	
CITY-ST-ZIP	PACE FL		2 3 STREET		3948 HWY 90	
TITLE	D	DELETE	2 4 CITY-5 3.1 TITLE	51 - ZIP	PACE FL 32571	Change Addition
NAME	WENDT, EARL D, JR		3 2 NAME			
STREET ADDRESS	3948 HWY 90		3.3 STREET	ADDRESS		
CITY-ST-ZIP	PACE FL		3.4 CITY-5	ST - ZIP		
TITLE	P	DELETE	4 1 THTLE			☐ Change ☐ Addition
NAME	LOWERY, GLYN, JR		4. 2 NAME			
STREET ADDRESS	3948 HWY 90		4.3 STREET	ADDRESS		
CITY-ST-ZiP TiTLE	PACE FL	Flotitit	4.4 CiTY - S	T - ZIP		
NAME		□D€LETE	51 THTLE			☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME	ADDOCCO		
CITY-ST-ZIP			5.3 STREET 5.4 City-S			
TITLE		DELETE	6.1 TITLE	1-215		Change Addition
NAME		_	6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - S	7 - ZIP		
			ished and does	s not qua	ify for the exemption stated in Section 119.07 curate and that my signature shall have the sa e this report as required by Chapter 617, Floric	
appears in	Block 12 or Block 13 if changed, of	on an attachment with an address	s ampowered (ess.	o execute	z mis report as required by Chapter 617, Florid	ia Statutes; and that my name

SIGNATURE: A. M. STEWART VD 3/7/96 (904) 994-7131
SIGNATURE AND EXPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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