

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 827912

1. Entity Name

HILLDRUP TRANSFER AND STORAGE, INCORPORATED

Principal Place of Business

4022 JEFFERSON DAVIS HWY
P.O. BOX 1290
STAFFORD VA 22554

Mailing Address

4022 JEFFERSON DAVIS HWY
P.O. BOX 1290
STAFFORD VA 22554-4827

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

54-0661748

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RITTERPUSCH, DICK
750 CENTRAL FLORIDA PARKWAY
ORLANDO FL 32824

Name

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

City

FL

Zip Code

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)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete

NAME MCDANIEL, C G
STREET ADDRESS 133 CAROLINE ST
CITY-ST-ZIP FREDERICKSBURG VA

TITLE ☐ Delete

NAME DODSON, D. BARRY
STREET ADDRESS 1708 RAINES DR
CITY-ST-ZIP FREDERICKSBURG VA

TITLE ☐ Delete

NAME MABE, LESTER
STREET ADDRESS 4022 JEFFERSON DAVIS HWY
CITY-ST-ZIP STAFFORD VA 22-5554

TITLE ☐ Delete

NAME MARSHALL, HILTON G.
STREET ADDRESS 2 PATRICK PLACE
CITY-ST-ZIP FREDERICKSBURG VA

TITLE ☐ Delete

NAME WOOD, HAROLD
STREET ADDRESS 25 HAMLIN DR
CITY-ST-ZIP FREDERICKSBURG VA

TITLE ☐ Delete

NAME MCDANIEL, CW
STREET ADDRESS 11 FOX RUN DR
CITY-ST-ZIP FREDERICKSBURG VA

TITLE ☐ Change ☒ Addition

NAME VP
Lester Mabe
STREET ADDRESS 4022 Jefferson Davis Hwy
CITY-ST-ZIP Stafford VA 22554

TITLE ☐ Change ☒ Addition

NAME VP
Randy Rantz
STREET ADDRESS 4022 Jefferson Davis Hwy.
CITY-ST-ZIP Stafford VA 22554

TITLE ☐ Change ☒ Addition

NAME VP
John Tompkins
STREET ADDRESS 4022 Jefferson Davis Hwy
CITY-ST-ZIP Stafford VA 22554

TITLE ☐ Change ☒ Addition

NAME VP
James Steagall
STREET ADDRESS 4022 Jefferson Davis Hwy
CITY-ST-ZIP Stafford VA 22554

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
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

1/12/00

(703)221-7155

CR2E034 (9/99)