## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT

## Apr 20, 2005 8:00 am Secretary of State **DOCUMENT # F02000004510** 04-20-2005 90340 013 \*\*\*150.00 SHAW TRANSPORT, INC. Mailing Address Principal Place of Business P.O. DRAWER 2128 **616 E WALNUT AVENUE** 50040238 DALTON, GA 30721 MAIL DROP 061-04 DALTON, GA 30722-2128 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04052005 CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 58-1502689 Not Applicable Country Zip Zip Country \$8.75 Additional .5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DΡ TITLE TITLE ☐ Delete Change | ☐ Addition BELL, VANCE D NAME NAME 616 EAST WALNUT AVE. STREET ADDRESS STREET ADDRESS CiTY-ST-ZIF DALTON, GA 30720 CITY-ST-ZIP ☐ Delete **X** Change TITLE TITLE Addition EMBRY, GERALD R NAME NAME 616 EAST WALNUT AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALTON, GA 30720 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE JACKSON, KENNETH G NAMĚ NAME 616 EAST WALNUT AVE. STREET ADDRESS STREET ADDRESS CITY-ST-7IP DALTON, GA 30720 CITY-ST-7IP ☐ Delete ☐ Addition AS TITLE Change TITLE NAME HOOPER, FREDERICK L NAME STREET ADDRESS STREET ADDRESS 616 EAST WALNUT AVE. CITY-ST-ZIP DALTON, GA 30720 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 10 or Block 11 if changed, or on an attachment with an addre

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SIGNATURE:

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**FILED**