## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED DOCUMENT # F9300000295 Apr 12, 2000 8:00 am Secretary of State CHOCTAW TRANSPORTATION COMPANY, INC. 04-12-2000 90016 041 \*\*\*150.00 Mailing Address Principal Place of Business P. O. BOX 585 P. O. BOX 585 DYERSBURG TN 38024 **DYERSBURG TN 38025-0685** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 64-0357840 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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. ☐ Change ☐ Addition ☐ Delete TITLE TITLE FORD, JOHN H NAME NAME STREET ADDRESS STREET ADDRESS 164 QUAIL HOLLOW DR. CITY-ST-ZIP CITY-ST-ZIP DYERSBURG TN 38024 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME FORD, JR., KENT NAME STREET ADDRESS STREET ADDRESS 309 PARKVIEW CITY-ST-ZIP CITY-ST-ZIP DYERSBURG TN 38024 ☐! Change **△**Addition Delete⁻ TITLE TITLE GLI DEWELL, TIM NAME CRAIG, NANCY NAME STREET ADDRESS STREET ADDRESS 2149 AZTEC DR Dyersburg TN 38024 CITY-ST-ZIP CITY-ST-ZIP DYERSBURG TN 38024 ☐ Addition Delete TITLE TITLE TD MOORE, JEAN F MOORE, JEAN F NAME NAME 1309 East Court St. STREET ADDRESS STREET ADDRESS 915 COOPER DR Dyersburg TN 38024 CITY-ST-ZIP CITY-ST-7IP DYERSBURG TN 38024 ☐ Change ☐ Delete TITLE TITLE HASSELLE THOMASW. NAME NAME 1309 East Court St. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Nyersburg TN 38024 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

ThomasW Hasselle

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR