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FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000001733 (5)

1. Corporation Name

FUEL SOUTH EXPRESS, INC.

Principal Place of Business

P. O. BOX 2149
WAYCROSS GA 31502

Mailing Address

P. O. BOX 2149
WAYCROSS GA 31502

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/30/1993

4. FEI Number

58-2020677

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No *N/A*

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

BURGESS, GRANVILLE
303 CENTRE STREET
STE. 200
FERNANDINA BCH. FL 32034

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CD
JONES, JAMES C III
STREET ADDRESS RT. #2 BOX 300F
CITY-ST-ZIP WAYCROSS GA 31501

TITLE ☐ DELETE

NAME D
JONES, PATRICK
STREET ADDRESS 1615 SEMINOLE SPRINGS RD.
CITY-ST-ZIP WAYCROSS GA

TITLE ☐ DELETE

NAME D
JONES, J C JR
STREET ADDRESS 505 BENT TREE RD.
CITY-ST-ZIP BLACKSHEAR GA 31516

TITLE ☐ DELETE

NAME P
WALKER, JAMES A JR
STREET ADDRESS 217 RIVER OAKS DR.
CITY-ST-ZIP BLACKSHEAR GA 31516

TITLE ☐ DELETE

NAME ST
WYSONG, PHIL
STREET ADDRESS 1304 ST. MARYS DR.
CITY-ST-ZIP WAYCROSS GA 31501

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an amendment with an address.

SIGNATURE:

Phil WYSONG

PHIL WYSONG

3/23/98

712-495-4611

CR2E034 (10/97)