## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # <b>F9600</b>	0000027 (0)				:			
= -	EASTERN RAILWAY SERVI	CES, INC.				A TRANSPORTED THE SHALL STAND STAND	ONEI <b>CO</b> IAL <b>A I</b>	AN <b>Da</b> ni <b>Ta</b> na (1	OLE 1886 1886
			. <u></u> .						
rino-pal Plane of Business Mailing Address							••••••		
PO BOX 72 MAGNOLIA MS	39652	PO BOX 72 Magnolia MS 39652							
						3. Date Incorporated or Qualified 12/29/1995	3a. Da	ite of Last Re	port
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number		L—L	oplied For
		26				64-0725824			lot Applicable
1	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional Required
		City & State				6. Election Campaign Financing			May Be
— City & State ∄	!	28				Trust Fund Contribution			to Fees
<u> </u> - Zip	Country	Zip	Cou	ntry		8. This corporation has liability for	intangible	tax under s	199.032,
]	25	29	30			Florida Statutes	<b>☑</b> No		
J	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New F	Registere	d Agent	
				81	Name				
SMOAK, RICHARD				82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)	······································	
103 W 5TH ST							,		
	CITY FL 32402-1006			63					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				84	City			. 85 Zij	Code
				1			<u> </u>	<u>L ]</u>	
SIGNATURE	Signature, typed or printed name of registered ag-	ort and tile if applicable (NO				ration submits this statement for the purif of directors. I hereby accept the application of directors and when renstating?  ADDITIONS/CHANGES TO OFF	DATE		
2.	DCPV	OFFICERS AND DIRECTORS  DELETE						Change	Addition
ITLE IAME	CULLOM, ALVIN M SR	<b>(</b>	1.13 12N	1.2 NAME					
	300 E RAILROAD AVE S		1		T ADDRESS				
PREET ADORESS BITY - ST-ZIP	MAGNOLIA MS 39652		1.4 CiTY-ST-ZIP						
111 · 51 · 20:	S	☐ DELETE	2 1 TITLE		-			Change	Addition
IAM:	CULLOM, FAYE	_	22 NAME						
STREET ADDRESS	300 E RAILROAD AVE S		2.3 \$	TREE	T ADDRESS				
01*Y+\$1+ <b>7</b> IP	MAGNOLIA MS 39652		240	HY-S	ST - ZIP				
ITLE	7	☐ DELETE	3.1	TITLE				Change	Addition
NAMÉ	CULLOM, DAVID M		3.2 N	IAME					
STREET ADDRESS	300 E RAILROAD AVE S		33	STREE	ET ADDRESS				
011Y - ST - <b>Z</b> IP	MAGNOLIA MS 39652				ST-ZIP			Change	Addition
TILF		☐ DELFTE	1	TITLE				C CHANGE	C.J Madright
NAME				NAME	l l				
STHEET ADDRESS	1		4.3 9	33913	T ADDRESS				
CITY ST ZIP									
		ET DELETE	440	OTY-	ST-ZIP			☐ Chance	☐ Addition
		DELETE	4 4 ( 5 1	OTY - : TITLE	S1 - ZIP			Change	Addition
NAME		☐ DELETE	44 ( 5 1 52 )	DITY - : TITLE NAME	ST - ZIP			☐ Change	Addition
NAME STREET ADDRESS		☐ DELETE	44 ( 5 1 52 ) 53 5	DITY - : TITLE NAME STREE	ST-ZIP			☐ Change	Addition
NAME STREET ADDRESS CHY-ST-7-P			44( 5 1 5 2) 5 3 5 5 4 (	DITY -: TITLE NAME STREE	ST-ZIP  ET ADDRESS ST-ZIP			☐ Change	☐ Addition
THE NAME STREET ADDRESS CHY-ST-Z-P TITLE NAME		☐ DEFELE	44( 5 1 52) 535 54( 6 1	DITY - : TITLE NAME STREE	S1-ZIP ET ADDRESS S1-ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 certify 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 attachment with an address.

6 4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

on Cullon

601-783-2006