FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000027 (0)

SOUTHEASTERN RAILWAY SERVICES. INC.

Principal Place of Business	Mailing Address	
· '	· ·	
PO BOX 72	PO BOX 72	
MAGNOLIA MS 39652	MAGNOLIA MS 39652	
1		

FILED Jan 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/29/1995 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 64-0725824 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt, #, etc. 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 30 24 25 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name SMOAK, RICHARD 103 W 5TH ST Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32402-1006 83 84 City 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 signatura required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change ___ Addition DELETE TITLE 1.1 TITLE CULLOM, ALVIN M SR 1.2 NAME NAME 300 E RAILROAD AVE S 1.3 STREET ADDRESS STREET ADDRESS MAGNOLIA MS 39652 1.4 CITY-ST-ZIP CITY - ST- ZIP Change Addition DELETE 2.1 TITLE TITLE CULLOM, FAYE 22 NAME NAME 300 E RAILROAD AVE S 2.3 STREET ADDRESS STREET ADDRESS MAGNOLIA MS 39652 2. 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE CULLOM, DAVID M 3.2 NAME NAME 300 E RAILROAD AVE S 3.3 STREET ADDRESS STREET ADDRESS MAGNOLIA MS 39652 CITY - ST - ZIP 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY - ST - ZIP __ Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 attachment with an address.

PRECIDENT 1-20.98 FRIDE LUBE PATROLLATION SC