FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 11, 2002 8:00 am DOCUMENT # F97000005956 **Secretary of State** 1. Entity Name YUKON TRUCKING COMPANY, INC. 02-11-2002 90159 043 ***150.00 Principal Place of Business Mailing Address 127 PINE ST. P O BOX 48 **NEWPORT NH 03773 NEWPORT NH 03773** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 02-0474075 Not Applicable Zip 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 WILSON, DAVID Street Address (P.O. Box Number is Not Acceptable) 4650 JUSTINE WOOD RD. FT MYERS FL 33905 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (10/6) TITLE PTDC ☐ Delete TITLE Change ☐ Addition NAME SKARIN. CHRISTINE W NAME CR2E034 STREET ADDRESS 11 PINE ST. STREET ADDRESS 76 Boyland Road CITY-ST-ZIP NEWPORT NH 03773 CITY-ST-7IP TITLE ۷Ŋ ☐ Delete TITLE Change ☐ Addition NAME WHIPPLE, LORRETTA NAME STREET ADDRESS 11 PINE ST. STREET ADDRESS 127 Pine Street CITY-ST-ZIP CITY-ST-ZIP **NEWPORT NH 03773** ☐ Delete TITLE TITLE Change ☐ Addition NAME WHIPPLE, TODD 127 Pine Street STREET ADDRESS STREET ADDRESS 11 PINE ST. CITY-ST-ZIP **NEWPORT NH 03773** CITY-ST-ZIP TITLE ☐ Delete Change TITLE ☐ Addition WHIPPLE, CARY L NAME STREET ADDRESS 11 PINE ST. STREET ADDRESS 127 Pine Steet CITY-ST-ZIP **NEWPORT NH 03773** CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition WHIPPLE, CARY G NAME NAME 127 Pine Steet STREET ADDRESS 11 PINE ST. STREET ADDRESS CITY-ST-ZIP **NEWPORT NH 03773** CITY-ST-ZIP TITLE Delete TITLE Addition Secretary Loretta Whipple NAME LEMAY, RONALD E NAME POST OFFICE BUILDING, #1 STREET ADDRESS STREET ADDRESS 127 Pine Street **GEORGE MILLS NH 03751** CITY-ST-ZIP Newport, NH 03773

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christine Skarin, President 1/22/02 603-863-1240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #