FILE	NOW: FI	TER MAY 1ST IS	FILED					
	PROFIT FLORIDA DEPARTM				TATE	☐ Jan 30 199	8 86	:00am
]	ANNUAL REPORT Secretary of Sta					i		
1998			1.7	DIVISION OF CORPORATIONS		Secretary	y oi	State
DOCU 1. Corporatio	MENT #	G46654	(1)					
SKYWA	Y TRUCKING	, INC.				ļ		
Principal Place of Business Mailing Address						- I SUBJILL BUIL DIRIO DIELS DELLE GIREF	ANDI BUNCI DENEL	BINIL BIBIT NINIT BINIL 1681
5061 2ND AVE SW 5061 2ND AVE SW 5061 2ND AVE SW 5061 2ND AVE SW								
NAPLES FL 34119-2527 NAPLES FL 33999 US US						DO NOT WRI 3. Date Incorporated or Qualified		PACE
03			03			06/28/1983	•	
2. Principal P	lace of Business		2a. Mailing Address			4. FEI Number		Applied For
2. Principal Place of Business 506: MAHOGANY RIDGE DE 5061 MAHOGANY RIDG					DGE I	DR - 59-2305723		Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				IXIX	\$8.75 Additional
27						5. Certificate of Status Desired	AAA	Fee Required
City & Stat NAP	LES, FL.		City & State NAPLES, FI	! •		Election Campalgn Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
10		Country	Zip	Country		8. This corporation owes or has		
Zip 3411	9 25	USA	29 34119	J USA		Personal Property Tax due Jui	_	Yes X No
	9. Name and	Address of Current F	10. Name and Address of New F		Agent			
						RONALD J. DAVIS S		
5061 2ND AVNEUE SE NAPLES FL 34119					Street Add	iress (P.O. Box Number is Not Accept	able)	
144 225 12 54110						MAHOGANY RIDGE DI	RIVE	
] ;	City	NAPLES,	FL	85 Zip Code 3 4 1 1 9
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	Kom	4 Davis				. DAVIS SR.	j	/26/98
	Signature typed or print	ed nave of registered agent of			signature requ	sired when reinstaling)	DATE	
12.		OFFICERS AND I	DIRECTORS XIXI DELETE	13,	SECRE	ADDITIONS/CHANGES TO OFF		
TITLE	S		4V DETER		1		X	Change
NAME	DAVIS, KATH					EEN M. DAVIS		
STREET ADDRESS	5061 2ND AV	-		1.3 STREET A	DDRESS	5061 MAHOGANY RII NAPLES, FL. 34119	GE DR	IVE
CITY-ST-ZIP TITLE		J0000	XX DELETE	1.4 CITY - ST - 2.1 TITLE				X Change Addition
NAME	PTD	ONALD	E Deceire	2.7 TITLE 2.2 NAME	- P	PTD		53 Ottalide 53 yearing
	Bitto of the trouble of					ONALD J. DAVIS SR. 061 MAHOGANY RIDGE DRIVE		
STREET ADDRESS				2.3 STREET A	3511120	NAPLES, FL. 34119		· ~
CITY - ST - ZIP	MATLES FL		DELETE	2. 4 CITY-ST 3.1 TITLE	· ZIF			Change Addition
NAME				3.2 NAME	-			
STREET ADDRESS				3.3 STREET A	nngese			
CITY ST. 7IP				34 CITY-ST				

14. I hereby certify that the information supplied with this filling 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 cath; 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.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TURK OR SUMMED AND TURK O

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

DELETE

DELETE

DELETE

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Change

Change

Change

___ Addition

Addition

Addition