

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H15415 (3)

1. Corporation Name

S. KING TRUCKING COMPANY, INC.



Principal Place of Business

151 DEER TRAIL EAST
SEBRING FL 33870

Mailing Address

151 DEER TRAIL EAST
SEBRING FL 33870

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

KING, SNEED
6400 WILSON TERRACE
SEBRING FL 33870

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
08/01/1984

3a. Date of Last Report
03/20/1995

4. FEI Number
59-2433521

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.07(2) 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Secretary or Treasurer

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
[] DELETE
2. TITLE
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3. TITLE
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20. TITLE
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CITY-STATE-ZIP
[] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
[] Change [] Addition
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
[] Change [] Addition
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
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13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
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18. NAME
19. STREET ADDRESS
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21. TITLE
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27. STREET ADDRESS
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77. TITLE
78. NAME
79. STREET ADDRESS
80. CITY-STATE-ZIP
[] Change [] Addition
81. TITLE
82. NAME
83. STREET ADDRESS
84. CITY-STATE-ZIP
[] Change [] Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 3-27-96 X 941-655-3838

CR2E034 (12/95)