

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 25, 2002 8:00 am  
Secretary of State

02-25-2002 90084 024 \*\*\*150.00

DOCUMENT # **H75865**

Entity Name

**S & G TRUCKING, INC.**

Principal Place of Business

% **GEORGE T. ELMORE**  
**2350 SOUTH CONGRESS AVENUE**  
**DELRAY BEACH FL 33445**

Mailing Address

% **GEORGE T. ELMORE**  
**2350 SOUTH CONGRESS AVENUE**  
**DELRAY BEACH FL 33445**

2. Principal Place of Business

**2101 S. CONGRESS AVE**

Suite, Apt. #, etc.

3. Mailing Address

**2101 S. CONGRESS AVE**

Suite, Apt. #, etc.

City & State

**DELRAY BEACH FL**

City & State

**DELRAY BEACH FL**

Zip

**33445**

Country

Zip

**33445**

Country

4. FEI Number

**59-2572294**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**ELMORE, GEORGE T.**  
**2350 SOUTH CONGRESS AVENUE**  
**DELRAY BEACH FL 33445**

7. Name and Address of New Registered Agent

Name **GEORGE T. ELMORE**

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

**2101 S. CONGRESS AVE**

City

**DELRAY BEACH**

**FL**

Zip Code

**33445**

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

**GEORGE T. ELMORE, PRES**

**1-5-02**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **ELMORE, GEORGE T.**  
STREET ADDRESS **2350 S CONGRESS AVE**  
CITY-ST-ZIP **DELRAY BCH FL 33445**

TITLE **VD** ☐ Delete  
NAME **SHERLOCK, CHRISTOPHER**  
STREET ADDRESS **2350 S CONGRESS AVE**  
CITY-ST-ZIP **DELRAY BCH FL 33455**

TITLE **STD** ☐ Delete  
NAME **GORDON, DOUGLAS G.**  
STREET ADDRESS **2350 S CONGRESS AVE**  
CITY-ST-ZIP **DELRAY BCH FL 33445**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition  
NAME **GEORGE T. ELMORE**  
STREET ADDRESS **2101 S CONGRESS AVE**  
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **VD** ☒ Change ☐ Addition  
NAME **CHRISTOPHER SHERLOCK**  
STREET ADDRESS **2101 S. CONGRESS AVE**  
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **STD** ☒ Change ☐ Addition  
NAME **DOUGLAS G. GORDON**  
STREET ADDRESS **2101 S. CONGRESS AVE**  
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

**GEORGE T. ELMORE, PRES**

**1-5-02**

Date

**561-278-0456 X200**

Daytime Phone #

CR2E034 (9/01)