

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J46349** (3)

1. Corporation Name

ALAMO SHUTTLE, INC.



Principal Place of Business

**C/O NORMAN D. TRIPP
110 S.E. SIXTH STREET - 28TH FLOOR
FT. LAUDERDALE FL 33301**

Mailing Address

**C/O JOHN DAMIAN
P O BOX 22776
FT. LAUDERDALE FL 33335
US**

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

9. Name and Address of Current Registered Agent

**SMITH, DENNIS DUSTIN
110 SE 6TH ST., 28TH FL
FT. LAUDERDALE FL 33301**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
12/10/1986

3a. Date of Last Report
05/01/1995

4. FEI Number

59-2749496

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 607.0502 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 607.0506, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PDC** ☒ DELETE
NAME **EGAN, MICHAEL S.**
STREET ADDRESS **110 SE 6TH ST., 28TH FL**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **DVC** ☒ DELETE
NAME **MORSE, EDWARD J.**
STREET ADDRESS **1240 N. FEDERAL HWY.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **ASD** ☐ DELETE
NAME **KELLY, WILLIAM H., JR.**
STREET ADDRESS **55 E MONROE STREET**
CITY-ST-ZIP **CHICAGO IL**

TITLE **SV** ☐ DELETE
NAME **TRIPP, NORMAN D.**
STREET ADDRESS **110 SE 6TH ST., 28TH FL**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P/C/D** ☐ Change ☒ Addition
1.2 NAME **COBB, KEITH D**
1.3 STREET ADDRESS **110 SE 6TH ST.**
1.4 CITY-ST-ZIP **FT. LAUDERDALE FL**

2.1 TITLE **T/AS/D** ☐ Change ☒ Addition
2.2 NAME **STEWART, GREGG, T**
2.3 STREET ADDRESS **110 SE 6TH ST.**
2.4 CITY-ST-ZIP **FT. LAUDERDALE FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS **400001804204**
4.4 CITY-ST-ZIP **-05/02/96-01013-003**

5.1 TITLE *****2000.00** ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96

Date: Daytime Phone: #

CR2E034 (12/95)