## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

J46478 DOCUMENT #

1. Entity Name

TRI-COUNTY TRUCKING OF SOUTHWEST FLORIDA, INC.



May 27, 2003 8:00 am Secretary of State

05-27-2003 90163 032 \*\*\*150.00

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Principal Place 527 PAUL MO ENGLEWOOD	PRRIS DRIVE	527	ng Address PAUL MORRIS DRIVE LEWOOD FL 34223				I IDANIDA BINI SIDIN BINI DISIN KARN	1011 <b>910</b> 11 <b>0</b> 1	<b>1</b> 51 <b>252</b> 15 <b>3</b> 1 <b>8</b> 51 1	83835 <b>8</b> 3843 3 <b>98</b> 3	
2. Principal P	Place of Business	3. Mai	iling Address			-					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_	CHECK HERE IF MAKING CHANGES					
City & State		City & State			4.	FEI Number 59-2753541	Applied For Not Applicable				
Zip	Country	Zip Coun			try	5.	Certificate of Status Desired		<b>\$8.75</b> Ad Fee Require		
	6. Name and Address of Current I	Registere	ed Agent			7. 1	Name and Address of New Rec	istered A	gent		]_
					Name						l
GROOTERS, DAVID J. 527 PAUL MORRIS DRIVE			Street Addres	ss (P.O. B	Box Number is Not Acceptable)						
ENGLEWO	OOD FL 34223				ľ						
					City			FL	Zip Cod	le	1
	named entity submits this statement for ions of registered agent.	the purp	oose of changing its	registere	ed office or regis	stered ag	gent, or both, in the State of Florid	da. I am f	amiliar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if app	olicable. (NOTE	: Registered	d Agent signature requ	uired when re	einstating)	DATE	<u>-</u>	· · ·	
F	ILE NOW!!! FEE IS \$150.00	<del></del>	}		<del></del>	<del></del>					1
Afte	May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State					Election Campaign Finar Trust Fund Contribution.	ncing		00 May Be d to Fees	
10.	OFFICERS AND I	DIRECTO	DRS	11.	*	AC	DDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	1
TITLE	PD		☐ Delete	TITLE					☐ Change	Addition	18
NAME V	GROOTERS, DAVID J.			NAME							15
STREET ADDRESS CITY-ST-ZIP	1840 WHISPERING PINES CR				ET ADDRESS -ST-ZIP						13
	ENGLEWOOD FL				<del></del>	·			<del></del>		ع ا
TITLE NAME	STD COOTEDS HADVA		☐ Delete	TITLE	l l				☐ Change	☐ Addition	15
STREET ADDRESS	GROOTERS, JUDY A. 1840 Whispering Pines Cr				ET ADDRESS						-
CITY-ST-ZIP	ENGLEWOOD FL			CITY-	-ST-ZIP						
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NAME STREET ADDRESS	•			NAME	ET ADDRESS						
CITY-ST-ZIP					ST-ZIP						
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (Javilla

## Office Southwest Florida, Inc.

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Document # J46478

To Whom It May Concern:

At this time, I am submitting the 2003 Uniform Business Report on behalf of Tri County Trucking of Southwest Florida, Inc. I am aware that this report is filed past the deadline date of May 1, 2003, however there are extenuating circumstances regarding this filing.

In August of 2002, I retired as bookkeeper and comptroller for Tri County Trucking of Southwest Florida, Inc. It was only recently discovered that the person who was hired as my replacement was not doing her job properly. She has been terminated and I have stepped in to try to help straighten out the mess this person created.

Therefore, at this time I am requesting your consideration to waive the late filing penalty of \$400.00. If you look back on the records of this company, you will find that we have complied with the filing date in the past.

Thank you in advance for your consideration regarding this matter.

Sincerely,

Joseph V. Cardinale

Comptroller