

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # K62150 (3)

1. Corporation Name
HUNTINGTON TRUCKING SERVICE INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 8630 GIBSON OAKS DR LAKELAND FL 33809		Mailing Address P.O. BOX 91073 LAKELAND FL 33804-1073 US	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28
22 City & State	27	27 City & State	28
23 Zip	25 Country	29 Zip	30 Country
9. Name and Address of Current Registered Agent SEWELL, CAROLYN 8630 GIBSON OAKS DR. LAKELAND FL 33809		10. Name and Address of New Registered Agent 81 Name HUNTINGTON, CAROLYN 82 Street Address (P.O. Box Number is Not Acceptable) 8630 GIBSON OAKS DR 83 LAKELAND 84 City LAKELAND FL 85 Zip Code 33809	

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 *Carolyn F. Huntington* *Carolyn F. Huntington* 4-28-98
Signature typed or printed name of registered agent and filed appointment (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	HUNTINGTON, RICHARD	1.2 NAME	
STREET ADDRESS	8630 GIBSON OAKS DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809	1.4 CITY-ST-ZIP	
TITLE	ST	2.1 TITLE	VP, Sec-T
NAME	SEWELL, CAROLYN	2.2 NAME	HUNTINGTON, CAROLYN
STREET ADDRESS	8630 GIBSON OAKS DR	2.3 STREET ADDRESS	8630 GIBSON OAKS DR
CITY-ST-ZIP	LAKELAND FL 33809	2.4 CITY-ST-ZIP	LAKELAND FL 33809
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 602, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard A. Huntington* *Richard A. Huntington* 4-28-98 941-858-1128

CR2E034 (10/97)