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Feb 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K99756

(4)

1. Corporation Name

D. YOUNG TRUCKING INC.

Principal Place of Business

C/O MARY D. YOUNG
1371 BROOKSIDE DR
VENICE FL 34292

Mailing Address

C/O MARY D. YOUNG
1371 BROOKSIDE DR
VENICE FL 34292-1402

New Address

2. Principal Place of Business

21 Suite, Apt. # 421 BLACKBURN PT. RD.
OSPREY, FL 34220
22 City & State 941-918-0207

23 Zip Country

24 25

2a. Mailing Address

26 P.O. Box 201

27 Suite, Apt. #, etc.

28 VENICE, FLA.

29 Zip Country

30 34284 Minnesota

3. Date Incorporated or Qualified
07/05/1989

3a. Date of Last Report
04/04/1996

4. FEI Number
65-0100400

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

9. Name and Address of Current Registered Agent

YOUNG, MARY D.
1371 BROOKSIDE DR
VENICE FL 34292
New Address:
421 BLACKBURN PT. RD.
OSPREY, FL 34220
941-918-0207

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME YOUNG, DONALD, SR.
STREET ADDRESS 1371 BROOKSIDE DRIVE
CITY - ST - ZIP VENICE FL

☐ DELETE

TITLE VST
NAME YOUNG, MARY D.
STREET ADDRESS 1371 BROOKSIDE DRIVE
CITY - ST - ZIP VENICE FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 421 BLACKBURN PT. RD.
1.4 CITY - ST - ZIP OSPREY, FL 34220
941-918-0207 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 421 BLACKBURN PT. RD.
2.4 CITY - ST - ZIP OSPREY, FL 34220
941-918-0207 ☒ Change ☐ Addition

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

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

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

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

14. I do 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 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

Date Daytime Phone #

2/16/97 941-485-9000

CR2E034 (9/96)