2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **L31006** Apr 17, 2000 8:00 am Secretary of State 1. Entity Name KENNEDY TRUCKING COMPANY 04-17-2000 90033 041 ***150.00 Principal Place of Business Mailing Address 502 BRIDGERS AVENUE 502 BRIDGERS AVENUE AUBURNDALE FL 33823 AUBURNDALE FL 33823 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-2979682 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BOSTICK, GUY Idress (P.O. Box Number is Not Acceptable) Company % 502 BRIDGERS AVE. REDRATION AUBURNDALE FL 33823 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. \Box Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE JACOBS, MILTON NAME 502 E BRIDGERS AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AUBURNDALE FL CITY-ST-7IP ☐ Delete ☐ Change Addition TITLE **BOSTICK, GUY** NAME STREET ADDRESS 502 E BRIDGERS AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUBURNDALE FL ☐ Change ☐ Addition DEVP TITLE □ Delete BOSTICK, MARK NAME STREET ADDRESS **502 E BRIDGERS AVE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUBURNDALE FL ☐ Delete ☐ Change Addition TITLE TITLE CONWAY, JAMES NAME NAME STREET ADDRESS **502 E BRIDGERS AVE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUBURNDALE FL ☐ Change Addition ☐ Delete TITLE TITLE READY, BILLY R NAME NAME STREET ADDRESS STREET ADDRESS 502 E. BRIDGERS AVE. CITY-ST-7IP CITY-ST-7IP AUBURNDALE FL Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.