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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L62866

TOMTODD TRUCKING, INC.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90011 026 ***150.00



	St. Comments						I BIBII BIBII BIBII			
Principal Place	of Business	Mailing Address						-		
C/O THOMAS E. CANTRELL C/O THOMAS E. CANTRELL										
1511 W DAUGHTERY RD LAKELAND FL 33810		1511 W DAUGHTERY RD LAKELAND FL 33810			DO NOT WRITE IN THIS SPACE					
US	US	NO 12 30010			3. Date Incorporated or Qualifed					
					04/02/1990					
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number			App	lied For	
21 26291	W. Socrum Loop Rd.	26 2629 W. SOLTH	MLO	op Rd.	59-3006219)		Not	Applicable	!
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of St.	atus Desired 🔲		\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			fay Be		
23 Lakeland, Florida		28 Lakeland, Fl.		Trust Fund Contribution Added to		Fees				
Zip	Country	Zip	Cour		8. This corporation	n owes the current y			<u>.</u>	
24 3381		29 <i>33810</i> 30	P	OIK	Personal Prope		Yes		No	
	9. Name and Address of Current	Registered Agent		04 N	10. Name and Add	dress of New Regis	tered Agent			
CAN	TRELL, THOMAS E.		ł	81 Name	omas E.	Cantrel	/			,
1511 DAUGHTERY ROAD			Ì	82 Street A	ddress (P.O. Box Numbe					l
LAKELAND FL 33809			-	83	29 W SOCI	rum Loa,	o RX	_		ļ
LANE	LEAND I'E 30003		İ	03						ĺ
· 			1	84 City	eland		FL k	Zip Co	3/0.	
11. Pursuant i	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes,	the ab	ove-named or	orporation submits this st	atement for the purp	ose of changir	ng its r as regi	egistered istered	l
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	Statu	tes.	attorns board or amostors.	, , , , , , , , , , , , , , , , , , ,	, appa			l
SIGNATURE										
	Signature, typed or printed name of registered agent			Agent signature req	uired when reinstating)	ANGES TO OFFICE	DS AND DIDE	· CTOE	29 IN 12	i 8
12.	OFFICERS AND	D DIRECTORS	13.	<u> </u>	ADDITIONS/Ch	ANGES TO OFFICE	Cha		Addition	(11/98
TITLE	PDC	C) Detere								
NAME	CANTRELL, THOMAS E.		1.2 NA							CR2E034
STREET ADDRESS	1511 DAUGHTERY RD.		l.	REET ADORESS						2
CITY-ST-ZIP	LAKELAND FL VDT	☐ DELETE	2.1 TIT	Y-ST-ZIP			Cha	anoe	Addition	5
TITLE		_ peacie		1			<u></u>			l
NAME	Cantrell, Dianna 1511 Daughtery RD.		2.2 NA							l
STREET ADDRESS	•			REET ADDRESS						į
CITY-ST-ZIP	LAKELAND FL SD:	☐ DELETE	3.1 TIT	ry-st-zip			[] Cha	ange	Addition	i
TITLE	= =	C) OFTER	3.1 III				L_ 0,"			l
NAME	CANTRELL, F. TODD 1511 DAUGHTERY RD			REET ADDRESS	•				Ì	i
STREET ADORESS	LAKELAND FL	·				•				l
CITY-ST-ZIP	LINCOMIN I L	DELETE	4.1 TIT	Y-ST-ZIP			Cha	ange	Addition	 -
NAME			4.2 NA				_	-	_	ı
]				REET ADDRESS					i	l
STREET ADDRESS				Y-ST-ZIP						i
CITY-ST-ZIP (☐ DELETE	5.1 TIT				Chi	ange	Addition	i
NAME :			5.2 NA	j			_			
STREET ADDRESS			5.3 STI	REET ADDRESS						i
CITY-ST-ZIP	•			Y-ST-ZIP						l
TITLE	·	DELETE	6.1 717	LE T	· · ·		☐ Cha	ange	☐ Addition	1
NAME		_ ·-	6.2 NA	ME						l
STREET ADDRESS			6.3 \$11	REET ADORESS						ļ
STREET AUDRESS	•		ľ	Y-ST-ZiP						l

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: