

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

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

04-22-1999 90156 012 ***150.00

0543376

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # L97041

1. Corporation Name

WEST FLORIDA MOBILITY, INC.

Principal Place of Business

1000 W. LEONARD ST.
PENSACOLA FL 32501
US

Mailing Address

1 RIVERWAY
SUITE 500
HOUSTON TX 77056
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

One Riverway

27

Suite, Apt. #, etc.

Ste 500

28

City & State

Houston TX

29

Zip

77056-1921

Country

USA

3. Date Incorporated or Qualified

08/17/1990

4. FEI Number

59-3026448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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	P	<input type="checkbox"/> DELETE
NAME	EARLY, BEN, C	
STREET ADDRESS	1000 W. LEONARD ST.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	VP/S	<input type="checkbox"/> DELETE
NAME	CERNY, DOUGLAS M	
STREET ADDRESS	COACH USA INC-ONE RIVERWAY-SUITE 600	
CITY-ST-ZIP	HOUSTON TX 77056	
TITLE	CFO	<input type="checkbox"/> DELETE
NAME	KING, LAWRENCE	
STREET ADDRESS	COACH USA INC-ONE RIVERWAY-SUITE 600	
CITY-ST-ZIP	HOUSTON TX 77056	
TITLE	CEO	<input checked="" type="checkbox"/> DELETE
NAME	KRISINIK, RICHARD H	
STREET ADDRESS	COACH USA INC-ONE RIVERWAY-SUITE 600	
CITY-ST-ZIP	HOUSTON TX 77056	
TITLE	ACS	<input type="checkbox"/> DELETE
NAME	THOMAS, STEPHANIE	
STREET ADDRESS	COACH USA INC-ONE RIVERWAY-SUITE 600	
CITY-ST-ZIP	HOUSTON TX 77056	
TITLE	TACS	<input type="checkbox"/> DELETE
NAME	TURNER, RAYMOND	
STREET ADDRESS	COACH USA INC-ONE RIVERWAY-SUITE 600	
CITY-ST-ZIP	HOUSTON TX 77056	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

SEE ATTACHED

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:

Stephanie Thomas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stephanie Thomas 3/26/99 713 860 1733
Date Daytime Phone #

CR2E034 (1/1/98)

389487-90156-12
L97041

Directors, Officers Report

West Florida Mobility, Inc.

Monday, April 05, 1999

DIRECTORS

Douglas M. Cerny **Director**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA

Lawrence King **Director**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA

John Mercadante, Jr. **Director**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA

OFFICERS

Douglas M. Cerny **Vice President, Corporate Secretary**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA

Benjamin C. Early **President**
Primary Address: 15 West Strong Street, Suite 20-B
Pensacola, FL 32501 USA

Lawrence King **Chief Executive Officer**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA

Michael Sanchez **Assistant Corporate Secretary**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, Texas 77056 USA

Stephanie Thomas **Assistant Corporate Secretary**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA

Raymond K. Turner **Treasurer, Assistant Corporate Secretary**
Primary Address: Coach USA, Inc.
One Riverway, Suite 500
Houston, TX 77056-1921 USA