


FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # M71731				Secretary of State	
1. Entity Name JUSTUS BOAT TRANSPORT "SOUTHERN" INC.					
Principal Place of Business 18580 EAST COLONIAL DR. ORLANDO, FL 32820 US		Mailing Address 18580 EAST COLONIAL DR. ORLANDO, FL 32820			
DO NOT WRITE IN THIS SPACE					
		03042008 No Chg-P CR2E034 (11/05)			
		4. FEI Number 59-2913689		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JUSTUS, RICHARD W 18580 EAST COLONIAL DR. UNIT 1506 ORLANDO, FL 32820		DO NOT WRITE IN THIS SPACE			
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE	P	DO NOT WRITE IN THIS SPACE			
NAME	JUSTUS, RICHARD W				
STREET ADDRESS	18580 EAST COLONIAL DR.				
CITY-ST-ZIP	ORLANDO, FL				
TITLE					
NAME					
STREET ADDRESS		DO NOT WRITE IN THIS SPACE			
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TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE: 		3-7-08 407-568-0019			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			