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

PROFIT **CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUI 1. Corporation	MENT # M8217	6 (2)				
JUDD T	RANSPORT, INC.					
Principal Place	e of Business	Mailing Address				#1814 Q1861 Q1971 1481
2023 CHAMPIONS AVE LAND O LAKES FL 34639		2023 CHAMPIONS AVE				
		LAND O LAKES FL 34639			DO NOT WOLTE IN THE SPA	OF:
					DO NOT WRITE IN THIS SPA  3. Date Incorporated or Qualified	UE .
					05/19/1988	
2. Principal P	lace of Business	2a. Mailing Address		<del>.</del>	4. FEI Number	Applied For
21		26			59-2891592	Not Applicable
Suite, Apt. #, etc Suite, Apt. #, e		Suite, Apt. #, etc.			5. Certificate of Status Desired	8.75 Additional
22		27	<u> </u>			Fee Required
City & State		City & State				\$5.00 May Be Added to Fees
<b>23</b> Z <sub>IP</sub>	Country	7 <sub>IP</sub>	Count	rv	Trust Fund Contribution  8. This corporation owes or has paid the current	
24	25	<b>},</b> '	30	,	Personal Property Tax due June 30.	
	9. Name and Address of Curren				10. Name and Address of New Registered Age	nt
	SKY, MICHAEL A.		8	1 Name		
601 E TWIGGS ST			8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
SUITE 200			8:			
TAJ	MPA FL 33602		0	3		
1			8	4 City	FL <sup>8</sup>	5 Zip Code
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508. Etorida Statute	es the abo	ve-named co	propration submits this statement for the purpose of cha	anging its registered
office or r	egistered agent, or both, in the State	of Florida, Such change was a	uthorized b	by the corpor	ration's board of directors. I hereby accept the appoint	ment as registered
*	Triannia with and accept the ornig	110000, 100 1100000, 10	noa Statot	<b>-9</b> .		
<del></del>	Signature, typed or purified name of registered agr		Registered A	gent signature rec	quired when reinstating) DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DI	
TITLE	STD DONALD D	L DELETE	1.1 TITLE		Ų	Change Addition
NAME DESCRIPTION	JUDD, DONALD R. 2023 CHAMPIONS AVE.		1.2 NAME			
STREET ADDRESS	LAND O'LAKES FL	,	1	ET ADDRESS		ļ
CITY-ST-ZIP TITLE	PD PD	DELETE	1.4 CITY- 2.1 TITLE			Change
NAME	JUDD, ANNE D.	70	2.2 NAME		<del>-</del>	
STREET ADDRESS	2023 CHAMPIONS AVE.	,		ET ADDRESS		
CITY-ST-ZIP	LAND O'LAKES FL		2 4 CITY	·		
TITLE		☐ DELFTE	3 1 TITLE			Change Addition
NAME			32 NAME			
STREET ADDRESS			3 3 STAE	ET ADDRESS		i
CITY-ST-ZIP			3 4. CITY			- A 4 4 1 1
TITLE		L_J DELETE	4 1 YITLE	1	Ц	Change Addition
NAME			4. 2 NAM			i
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	44 CITY-		П	Change Addition
NAME		C *****	5.2 NAME	i	_	
STREET ADDRESS				ET ADDRESS		Ì
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE	6 1 TITLE			Change
NAME			6 2 NAME			
STREET ADDRESS			63 STREI	ET ADORESS		ſ
amia==a						

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 trusted 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 attri/timent with an artdress?

SIGNATURE:

**FILED** 

Mar 19 1998 8:00am

Secretary of State