

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
 05-18-2001 91746 001 ***300.00

DOCUMENT # P00000117240

1. Entity Name

FLORIDA EXPRESS CARRIERS, INC.

Principal Place of Business

**ONE MALAGA STREET
 ST. AUGUSTINE FL 32084**

Mailing Address

**ONE MALAGA STREET
 ST. AUGUSTINE FL 32084**

2. Principal Place of Business

12735 Gran Bay Parkway W.

3. Mailing Address

12735 Gran Bay Parkway W.

Suite, Apt. #, etc.

Building 200, Suite 201

Suite, Apt. #, etc.

Building 200, Suite 201

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32258

Country

USA

Zip

32258

Country

USA

4. FEI Number

59-3688077

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EDDINS, HEIDI J
 ONE MALAGA STREET
 ST. AUGUSTINE FL 32084**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **EDDINS, HEIDI J**
 STREET ADDRESS **ONE MALAGA STREET**
 CITY-ST-ZIP **ST. AUGUSTINE FL 32084**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME **SEE ATTACHED LIST**
 STREET ADDRESS **OF ADDITIONS.**
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TOM CONNARD

Date

4/25/01

Daytime Phone #

(904)265-4500

CR2E034 (10/00)

Florida Express Carriers, Inc.
List of Officers and Directors

Officers	Name	Address	City & State
Chairman	Robert Anestis	One Malaga St.	St. Augustine, Florida 32084
President	Tom Connard	12735 Gran Bay Parkway West, Bldg 200 Ste. 201	Jacksonville, Florida 32258
Secretary	Heidi J. Eddins	One Malaga St.	St. Augustine, Florida 32084
Treasurer	Richard Smith	One Malaga St.	St. Augustine, Florida 32084
Director	Tom Connard	12735 Gran Bay Parkway West, Bldg 200 Ste. 201	Jacksonville, Florida 32258
Director	Robert Anestis	One Malaga St.	St. Augustine, Florida 32084
Director	Heidi J. Eddins	One Malaga St.	St. Augustine, Florida 32084

attachment

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