## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100080328  1. Entity Name TRANSIT ADVERTISING LIMITED, INC.								Secretary of State 04-07-2002 90570 008 ***150.00			
Principal Place of Business 3516 RIDDICK DRIVE PENSACOLA FL 32504			;	Mailing Address 3516 RIDDICK DRIVE PENSACOLA FL 32504							
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State				City & State				4. FI	El Number 59 – 3016875		Applied For Not Applicable
Zip	Country			Zip Cour		iry			Certificate of Status Desired	Fee Requir	
6. Name and Address of Current Registered Agent						Name	7. Name and Address of New Registered Agent				
CROSSLAND, DEBORAH 3516 RIDDICK DRIVE					Street A	et Address (P.O. Box Number is Not Acceptable)					
	LA FL 3250	4									
ì						City FL Zip Code				de	
8. The above	į.	y submits this stateme			_	d Agent signate			ent, or both, in the State of Florida.	DATE	
9. This corporation is eligible to satisfy its Intangib  Tax filing requirement and elects to do so.  (See criteria on back)				After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta			550.00	- 1	10. Election Campaign Financin Trust Fund Contribution.	☐ Adde	<b>00</b> May Be ed to Fees
11.	1	OFFICERS A	AND DIRE		12.		Prez	ADD	DITIONS/CHANGES TO OFFICER		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	II II		Jarn 3510 Pensa	y D. Bridge	Crossland iddick Drive la, FL 32504	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		□ Delete	- 11		Debo	retary/Treasurer/VP   Change   Ai Dorwh Crossland G. Riddick Drive SACO10, FL			Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	Ш					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TI .					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	III .					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	CITY-	ET ADDRESS ST-ZIP			10.07/2Vi) Elorido Statutos I furthera	☐ Change	Addition

intereopy cerury 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 the corporation 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 the corporation of 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

Date

CR2E034 (9/01)