

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0154920 FP

DOCUMENT # P02000015380

1. Entity Name

S & R TRANSPORTATION ENTERPRISES, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 SEP -10 AM 8:00

Principal Place of Business

1153 NORTHWEST 6TH COURT  
CRYSTAL RIVER FL 34428

Mailing Address

1153 NORTHWEST 6TH COURT  
CRYSTAL RIVER FL 34428

2. Principal Place of Business

1153 NorthEast 6th CT

3. Mailing Address

1153 NorthEast 6th CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

MRD

City & State

Crystal River, FL

City & State

Crystal River

4. FEL Number

75-2996838

Applied For

Not Applicable

Zip

34428

Country

USA

Zip

34428

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NEDELISKY, DARYL K ESQ

1650 NORTHWEST 38TH AVENUE

OCALA FL 34482

7. Name and Address of New Registered Agent

Name CHARLES JAMES

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

1153 NE 6th Ct.

City Crystal River

FL

Zip Code

34428

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

*Charles S. James*  
Signature, typed or printed name of registered agent and title if applicable.

CHARLES S. JAMES PRESIDENT/DIRECTOR

9-5-03

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME NEDELISKY, DARYL K  
STREET ADDRESS 1650 NW 38TH AVENUE  
CITY-ST-ZIP Ocala FL 34482 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME CHARLES S. JAMES  
STREET ADDRESS 1153 NE 6th Ct  
CITY-ST-ZIP Crystal River, FL 34428 ☐ Change ☐ Addition

TITLE S  
NAME Ruby James  
STREET ADDRESS 1153 NE 6th Ct  
CITY-ST-ZIP Crystal River, FL 34428 ☐ Change ☐ Addition

TITLE D  
NAME Charles S. James  
STREET ADDRESS 1153 NE 6th Ct  
CITY-ST-ZIP Crystal River, FL 34428 ☐ Change ☐ Addition

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

*Charles S. James*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES S. JAMES PRESIDENT/DIRECTOR 9-5-03

352.563.0614

Date

Daytime Phone #

CR2E034 (4/03)