

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000041928

1. Corporation Name

CHANNING TRANSPORTATION COMPANY

REINSTATEMENT 03

200024389092
11/03/03--01102--016 **150.00

2. Principal Office Address

5200 NW EGRET AVE.

Suite, Apt. #, etc.

3. Mailing Office Address

5200 NW Egret Ave.

Suite, Apt. #, etc.

City & State

PORT SAINT LUCIE FL

Zip

34983

Country

USA

City & State

Port Saint Lucie, FL

Zip

34983

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/11/02

5. FEI Number

02-0619938

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Marylea L Cross

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

5200 NW Egret Ave.

Suite, Apt. #, Etc.

City

Port Saint Lucie

State

FL

Zip Code

34983

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

James S. Cross
REGISTERED AGENT MUST SIGN

Date *OCT 30, 2003*

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officers and/or Director	City/State/Zip
D	Cross, James S.	5200 NW Egret Ave.	Port Saint Lucie, FL 34983

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

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

Date

OCT 30, 2003

Daytime Phone #

343 8965

REQUEST FOR WAIVER


UNIFORM BUSINESS REPORT (UBR) 2003

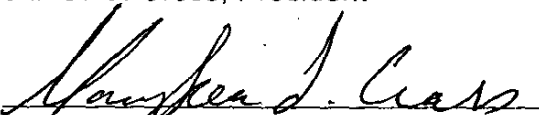
DOCUMENT #PO2000041928

The undersigned officer and director of Channing Transportation Company, Inc. Hereby requests waiver of the penalty for the late filing of the attached Uniform Business Report on the grounds that the corporation did not receive a prior notice of filing.

Dated this 30 Day of October, 2003

Channing transportation company, Inc.


James S. Cross, President


Marylea L. Cross, Secretary/Treasurer