

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2008 8:00 am
Secretary of State

07-21-2008 90032 002 ***150.00

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1. Entity Name
TRANSIT RENTALS OF TLH INC.



Principal Place of Business
2100 AUTUMN LN
TALLAHASSEE, FL 32305

Mailing Address
2100 AUTUMN LN
TALLAHASSEE, FL 32305

40111799



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07152008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number
59-2731919

Applied For
Not Applicable

Zip

Country

Zip

Country

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

MARRONE, FRANK
2100 AUTUMN LANE
TALLAHASSEE, FL 32305

Name Park T. Brittle

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

6046 W. Tenn. St.

City Tallahassee FL Zip Code 32304

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

Park T. Brittle

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

(NOTE: Registered Agent signature required when reinstating)

7/18/08

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME MARRONE, FRANK
STREET ADDRESS 2100 AUTUMN LN
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE P ☒ Change ☐ Addition
NAME Park T. Brittle
STREET ADDRESS 6046 W. Tenn St
CITY-ST-ZIP Tallahassee, FL 32304

TITLE VP ☐ Delete
NAME MARRONE, JOE A
STREET ADDRESS 2100 AUTUMN LN
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE VP ☐ Change ☐ Addition
NAME MARRONE, Joe A
STREET ADDRESS 2100 Autumn Ln P.O. Box 427
CITY-ST-ZIP Wacissa, FL 32361

TITLE ST ☐ Delete
NAME MARRONE, DAVID
STREET ADDRESS U.S. 160
CITY-ST-ZIP FRONTENAC, KS 66105

TITLE ST ☒ Change ☐ Addition
NAME MARRONE, Joe A.
STREET ADDRESS P.O. Box 427
CITY-ST-ZIP Wacissa, FL 32361

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.

SIGNATURE:

Joe A. Marrone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/08

Date

850-575-5336

Daytime Phone #