

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077542

FILED
Apr 13, 2009
Secretary of State

Entity Name: SEMINOLE TRANSPORTATION INC.

Current Principal Place of Business:

5001 LAKEFRONT DRIVE L-5
TALLAHASSEE, FL 32303

New Principal Place of Business:

5001 LAKEFRONT DRIVE L-4
TALLAHASSEE, FL 32303

Current Mailing Address:

5001 LAKEFRONT DRIVE L-5
TALLAHASSEE, FL 32303

New Mailing Address:

5001 LAKEFRONT DRIVE L-4
TALLAHASSEE, FL 32303

FEI Number: 20-0110617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SZELONG, CYNTHIA D
4790-D WOODLANE CIRCLE
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SMITH, JAMES D
Address: 5001 LAKEFRONT DRIVE DRIVE L-4
City-St-Zip: TALLAHASSEE, FL 32303

Title: VS (X) Delete
Name: SMITH, SAM
Address: PO BOX 395
City-St-Zip: OCLOCKNEE, GA 31773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES D. SMITH

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date