

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90391 039 ***150.00

DOCUMENT # P03000143221 1. Entity Name JOE REEDER TRUCK AND TRACTOR SERVICE, INC.					
Principal Place of Business 6459 LYNWOOD CIR MILTON, FL 32583			Mailing Address 6459 LYNWOOD CIR MILTON, FL 32583		
2. Principal Place of Business 4473 Proffitt Lane		Mailing Address P.O. Box 642			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Milton FL		City & State Bogdard FL		4. FEI Number 20-0420599	
Zip 32583		Country USA		Applied For ☐ Not Applicable	
Zip 32530		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent REEDER, JOSEPH 6459 LYNWOOD CIR MILTON, FL 32583				7. Name and Address of New Registered Agent Name Reeder, Joseph Street Address (P.O. Box Number is Not Acceptable) 4473 Proffitt Lane Milton 32583 City FL Zip Code	
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 <u><i>Joseph Z. Reeder</i></u> DATE <u>4-1-04</u> (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, JOSEPH 6459 LYNWOOD CIR MILTON, FL 32583	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Reeder, Joseph 4473 Proffitt Lane Milton, FL 32583
☐ Change ☐ Addition				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, DIANA 6459 LYNWOOD CIR MILTON, FL 32583	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, DIANA 4473 Proffitt Lane Milton FL 32583
☐ Change ☐ Addition				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, KRYSTAL 6459 LYNWOOD CIR MILTON, FL 32583	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, KRYSTAL 4473 Proffitt Lane Milton, FL 32583
☐ Change ☐ Addition				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, KRYSTAL 6459 LYNWOOD CIR MILTON, FL 32583	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER, KRYSTAL 4473 Proffitt Lane Milton, FL 32583
☐ Change ☐ Addition				☐ 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 all other like empowered.					
SIGNATURE: <u><i>Diana L. Reeder</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date <u>4/1/04</u> Daytime Phone # <u>850/423-9850</u>	