

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
Jan 29, 2008 8:00 am
Secretary of State**

01-29-2008 90016 018 ***150.00

DOCUMENT # p04000101938
1. Entity Name
TIBURON TRANSPORTATION SERVICES INC

DO NOT WRITE IN THIS SPACE

40012475 ✓

2. Principal Place of Business
300 SANDIRON CIRCLE UNIT 314
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
PONTE VEDRA BEACH, FL
Zip Country
32082

City & State
Zip Country

4. FEI Number
55-0874211
Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name
CODY, RUSSELL W.
Street Address (P.O. Box Number is Not Acceptable)
300 SANDIRON CIRCLE, UNIT 314
City State Zip Code
PONTE VEDRA BEACH FL 32082

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	D CODY, RUSSELL W. 300 SANDIRON CIRCLE, UNIT 314 PONTE VEDRA BEACH, FL 32082
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  RUSSELL W. CODY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: JAN 22, 2008
904 280-8081
Daytime Phone #