2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P92000007195 1. Entity Name BYRD SCHOOL BUSES, INC. Principal Place of Business Mailing Address RICKER ROAD 4267 RICKER ROAD KS/180701 F FL 32210 JACKSONVILLE FL 32210-6301 2. Principal Place of Business

Suite, Apt. #, etc.

BYRD, JAMES P

4267 RICKER ROAD JACKSONVILLE FL 32210

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

BYRD, JAMES P

BYRD, MARY L

4267 RICKER ROAD

4267 RICKER ROAD

JACKSONVILLE FL 32210

JACKSONVILLE FL 32210

Country

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

City & State

Zip

SIGNATURE.

11.

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE.

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

(See criteria on back)

PTD

VSD

3. Mailing Address

City & State

Suite, Apt. #, etc.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

TITLE

TITLE

NAME

TITLE

NAME

TITLE

NAME

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TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

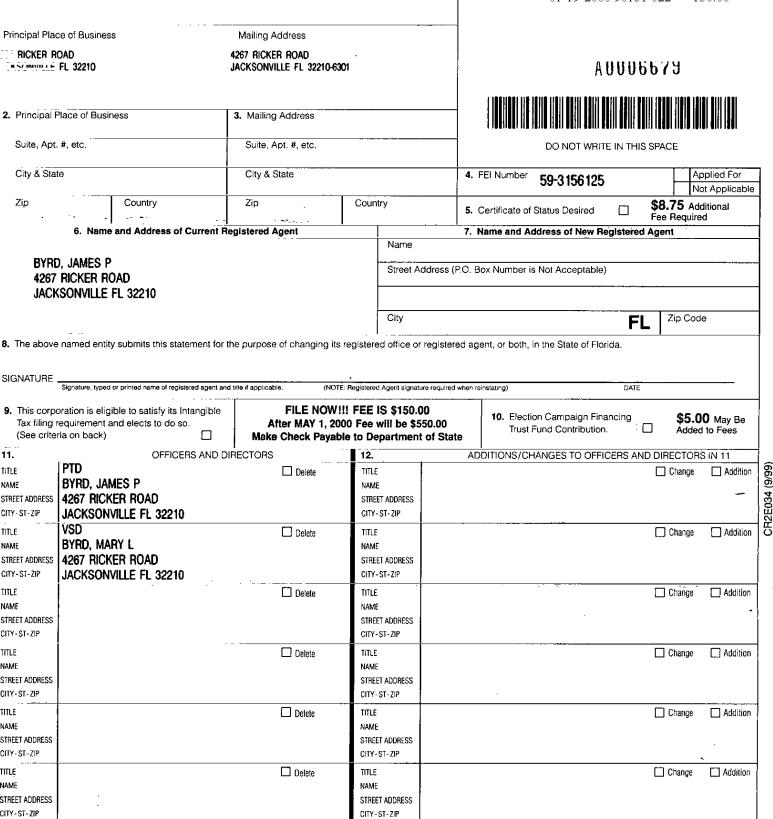
CITY-ST-7IP

Name

City

FILED Jan 19, 2000 8:00 am Secretary of State

01-19-2000 90151 022 ***150.00



13. 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 it 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 11 or Block 12 if with an address. changed, or on an attachment with all other like empowered.

CITY-ST-ZIP

MARY L. BYRD/VICE

Daytime Phone #