

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000011307

FILED  
Sep 16, 2009  
Secretary of State

**Entity Name:** CHECKER TRANSPORTATION OF JACKSONVILLE INCORPORATED

**Current Principal Place of Business:**

2903 LEONID ROAD  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

2554 WEST 43RD  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

P.O. BOX 9998  
JACKSONVILLE, FL 32208 US

**New Mailing Address:**

**FEI Number:** 59-3196236      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBINSON, LUELLA J  
5565 MINOSA CIR E  
JACKSONVILLE, FL 32209 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROBINSON, LUELLA J  
Address: 5565 MINOSA CIR E  
City-St-Zip: JAX, FL 32209

Title: VP ( ) Delete  
Name: ROBINSON, STANLEY C  
Address: 2554 W. 43RD STREET  
City-St-Zip: JACKSONVILLE, FL

**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: STANLEY C ROBINSON

VP

09/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date