## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

2755 LAUREL AVE LAKE WALES FL 33853-5243

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 23 1997 8:00am

Secretary of State

941-676-0622

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000012061 (6)

STORMS TRUCKING, INC.

appears in Block 12 or Big

Principal Place of Business

2755 LAUREL AVE

LAKE WALES FL 33853

							ate of Last Report 25/1996	
2. Principal F	Place of Business	2a. Mailing Ad	dress			4. FEI Number	Applied For	
21		26	6			59-3167964	Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		***************************************	6. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	ite		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Ζιρ	L	Country		8. This corporation has liability for intangible		
24	25	29	30					
	Name and Address of Current Registered Agent				Name	10. Name and Address of New Registered	Agent	
	STORMS, JACQUELYN E				81 Name			
2755 LAUREL AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)				
LAKI	LAKE WALES FL 33853				83			
					City	FL	85 Zip Code	
44 Duray and	to the previous of Castions 607 (II	E00 and 607 1508 Fix	wide Clatitae the	25000	no bomor		f changing its registered	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.								
SIGNATURE	Signature, typed or profed name of registered a	acent and title if applicable	(NOTE: Register)	red Age	nt signature (er	iquired when reinsta(ing) DATE		
12.		ND DIRECTORS	13.		il Digital -	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	D		DELETE 1.1 T	TITLE			Change Addition	
NAME	STORMS, JAMES N			NAME				
STREET ADDRESS	DIDRESS 2755 LAUREL AVENUE			STREET .	ADDRESS			
CHY-ST-7IP	LAKE WALES FL 33853		1.4 (	CITY-ST	T-ZIP			
1016	D			TITLE			Change Addition	
NAME	• • • • • • • • • • • • • • • • • • • •			NAME				
STREET ADDRESS				STREET.	ADDRESS			
CITY - ST - ZIP	LAKE WALES FL 33853			CITY-S	i - ZIP			
TILE		LI LI	DELETE 3.1 T	TITLE			Change Addition	
NAMÉ	3.2			NAME				
STREET ADDRESS			3.3 \$	STREET.	ADDRESS			
CHY-S1-ZiP				CITY-S	iT-ZIP			
TITLE		Ц	DELETE 4.1 T	TITLE			Change Addition	
NAME			4 21	NAME				
STREET AOORESS			4.3 \$	STREET	ADDRESS			
Cf*Y+S1+7iF				CITY-ST	1-ZIP			
TITLE		L		TITLE			Change Addition	
NAMI				NAME				
STREET ADDRESS					ADDRESS			
CITY-S1-ZiF				CITY-S1	I-ZIP		Ob Addition	
Title				TITLE			Change Addition	
NAME				NAME				
STREET ADDRESS			i i		ADDRESS			
CITY-ST-20P				CITY-S1		)		
informate I am an (	The centry that the information supplicion indicated on this annual leport of officer or director of the corporation	r supplemental annua	report is the and	accu	mption stat trate and the ote this rer	tled in Section 119.07(3)(i), Florida Statutes. I furthe hat my signature shall have the same legal effect as port as required by Chapter 607, Florida Statutes; a	r certify that the s if made under oath; that and that my name	