

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000028904 (9)

1. Corporation Name

TALCO FREIGHT SYSTEMS, INC.



Principal Place of Business

306 WINSTON CREEK PKWY
LAKELAND FL 33809
US

Mailing Address

306 WINSTON CREEK PKWY
LAKELAND FL 33809
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

PATTERSON, SAMUEL J. JR.
2066 COUNTRY CLUB CT
PLANT CITY FL 33567

3. Date Incorporated or Qualified

04/20/1993

3a. Date of Last Report

04/21/1995

4. FEI Number

59-3182430

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1608, 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 607.0503, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent of the corporation

Signature of the person who is the registered agent of the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPT	WHEELER, ALVIN	DELETE
NAME			
STREET ADDRESS		305 WINSTON CREEK PKWY	
CITY, ST, ZIP		LAKELAND FL	
TITLE	DVS	PATTERSON, SAMUEL J. JR.	DELETE
NAME			
STREET ADDRESS		305 WINSTON CREEK PKWY	
CITY, ST, ZIP		LAKELAND FL	
TITLE			DELETE
NAME			
STREET ADDRESS			
CITY, ST, ZIP			
TITLE			DELETE
NAME			
STREET ADDRESS			
CITY, ST, ZIP			
TITLE			DELETE
NAME			
STREET ADDRESS			
CITY, ST, ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, ST, ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 manager or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96

(941) 683-4380

CR2E034 (12/95)