FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 9:37

DOCUMENT # P93000029265 (4)

1. Corporation Name
TRANSPORTATION SUPPORT GROUP, INC.

Principal Place of Business
~~506 FRANK SHAW RD~~
~~TALLAHASSEE FL 32312~~
3370 Capital Circle NE, Suite D
Tallahassee, FL 32308

Mailing Address
1400 VILLAGE SQUARE BLVD
UNIT 3-114
TALLAHASSEE FL 32312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/21/1993
3a. Date of Last Report: 04/25/1994

2. Principal Place of Business (21): 3370 Capital Circle NE
Suite, Apt. #, etc (22): Suite D
City & State (23): Tallahassee, FL
Zip (24): 32308 Country (25): USA

2a. Mailing Address (26):
Suite, Apt. #, etc (27):
City & State (28):
Zip (29): Country (30):

4. FEI Number: 59-3178157 — 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

9. Name and Address of Current Registered Agent
DANTIN, DEBORAH M
~~1400 VILLAGE SQUARE BLVD~~
~~UNIT 3-114~~
~~TALLAHASSEE FL 32312~~

10. Name and Address of New Registered Agent
81 Name: SAME
82 Street Address (P.O. Box Number is Not Acceptable): 3370 CAPITAL CIRCLE NE
83: SUITE D
84 City: Tallahassee, FL 85 Zip Code: 32308

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 printed name of registered agent and the date of change) (NOTE: Registered Agent signature required when name change) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	11 TITLE	☑ Change ☑ Addition
NAME	DANTIN, DEBBIE M	12 NAME	
STREET ADDRESS	506 FRANK SHAW RD	13 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	14 CITY-ST-ZIP	32312
TITLE	VS	21 TITLE	☑ Change ☑ Addition
NAME	FARIS, JERRY M	22 NAME	
STREET ADDRESS	~~4106 NADIE RD~~	23 STREET ADDRESS	4106 TRALEE ROAD
CITY-ST-ZIP	TALLAHASSEE FL	24 CITY-ST-ZIP	32308
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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

SIGNATURE: Deborah M. Dantin — DEBORAH M. DANTIN (SIGNATURE AND TYPED OR PRINTED NAME OF MORNING OFFICER OR DIRECTOR) — 2/16/95 (DATE) — (904)385-6362 (DAYTIME PHONE)

0027004 CP