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

FILED
96 APR 29 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P93000029265

1. Corporation Name
Transportation Support Group, Inc.

Principal Place of Business
3370 Capital Circle, N.E.
Suite D
Tallahassee, FL. 32308

Mailing Address
Same

2. Principal Place of Business
21 3370 Capital Circle N.E.
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

3. Date Incorporated or Qualified: April 21, 1993
3a. Date of Last Report: February 16, 1995
4. FEI Number: 59-3178157 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required
6. Elect on 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
~~Deborah M. Dantin~~
506 ~~Frank Shaw~~ Rd.
~~Tallahassee, FL 32312~~

10. Name and Address of New Registered Agent
81 Name: Melba F. Faris
82 Street Address (P.O. Box Number is Not Acceptable): 4106 Tralee Rd
83
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: Melba F. Faris — Melba F. Faris — April 29, 1996
Signature, typed or printed name of registered agent, and title, if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President ☑ DELETE	1.1 TITLE	President (President/Treasurer)(PT) ☐ Change ☑ Addition
NAME	Deborah M. Dantin	1.2 NAME	Melba F. Faris
STREET ADDRESS	506 Frank Shaw Rd	1.3 STREET ADDRESS	4106 Tralee Rd
CITY-ST-ZIP	Tallahassee, FL 32312	1.4 CITY-ST-ZIP	Tallahassee, FL 32308
TITLE	☐ DELETE	2.1 TITLE	Director (D) ☐ Change ☑ Addition
NAME		2.2 NAME	Mikal O. Watnee
STREET ADDRESS		2.3 STREET ADDRESS	2808 Sweetbriar Drive
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Tallahassee, FL 32312
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (12/95)

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 receiver 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 on an attachment with an address.

SIGNATURE: Melba F. Faris — Melba F. Faris — Apr. 29, 1996 — (904) 385-6362
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2996