

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000033997

FILED
Apr 30, 2003
Secretary of State

Entity Name: CENTRAL FLORIDA FREIGHT FORWARDERS, INC.

Current Principal Place of Business:

302 S MASSACHUSETTS AVENUE
SUITE 200
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 485
LAKELAND, FL 33802 US

New Mailing Address:

PO BOX 3566
LAKELAND, FL 33802 US

FEI Number: 59-3186908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, JO ELLEN
1731 ITCHEPACKESASSA DR
LAKELAND, FL 33810 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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GREENE, RICHARD K
Address: 1705 ITCHEPACKESASSA DR
City-St-Zip: LAKELAND, FL

Title: V () Delete
Name: GREENE, JO ELLEN
Address: 1731 ITCHEPACKESASSA DR
City-St-Zip: LAKELAND, 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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD K GREENE

P

04/30/2003

Electronic Signature of Signing Officer or Director

_____ Date