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 # P93000070501 (0)

1. Corporation Name
COWBOY TRUCKING SERVICES, INC.

Principal Place of Business
~~5595 L.B. MCLEOD RD~~
~~ORLANDO FL 32811~~

Mailing Address
~~PO BOX 616300~~
~~ORLANDO FL 32861-6300~~
~~US~~

3. Date Incorporated or Qualified: 10/04/1993
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21 8340 American Way
Suite, Apt #, etc.
22
City & State
23 Groveland, Fl.
Zip 24 34736 Country 25 USA

2a. Mailing Address
26 P.O. Box 625
Suite, Apt. #, etc.
27
City & State
28 Groveland, Fl.
Zip 29 34736 Country 30 USA

4. FEI Number: 59-3208154 ☐ 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**
~~FULMER, BARBARA B~~
~~5595 L.B. MCLEOD RD~~
~~ORLANDO FL 32811~~

10. **Name and Address of New Registered Agent**
81 Name: FULMER, Philip R.
82 Street Address (P.O. Box Number is Not Acceptable): 8000 Cherry Lake Rd.
83
84 City: Groveland FL 85 Zip Code: 34736

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]
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
EVP	FULMER, BARBARA B	8971 CHARLESTON PK	ORLANDO FL	☐
VP	TURNER, CYNTHIA F	137 HARTINGTON DR	MADISON AL	☐
PRES	FULMER, PHILIP R	~~1010 PALADIN CT~~	~~ORLANDO FL~~	☐
SEC	FULMER, CARROLL A	~~1665 DOSS AVE~~	~~ORLANDO FL~~	☐
VP	FULMER, TIMOTHY A	9239 WOODBREEZE BLVD.	WINDERMERE FL	☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1					☐	☐
2					☐	☐
3			8000 Cherry Lake Rd.	Groveland, Fl. 34736	☐	☐
4			14726 GORD NECK Dr.	MONTEVERDE, Fl. 34756	☐	☐
5					☐	☐
6					☐	☐

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: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)